

FROM TESTING THE WATER TO RIDING THE WAVES:
NEW MASTER OF SOCIAL WORK GRADUATES' JOURNEY
FROM STUDENT TO PROFESSIONAL

Susan Larimer

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Kathy Lay, Ph.D., Chair

Margaret E. Adamek, Ph.D.

Doctoral Committee

Robert Bennett, DSW

Claire Draucker, Ph.D.

July 23, 2015

Khadija Khaja, Ph.D.

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Susan Larimer

Dedication

To my daughter Sarah (Sarina).

Thanks for making me laugh,
supporting my journey, and
inspiring me with all that you do.

You are my heart.

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So many people have been encouraging to me on this ten-year journey. A special thanks to my amazing Mom, Elaine Glassburn, who has always believed in me and thinks everything I do is wonderful (even when it isn't!). What a gift to have a Mom like that! Thanks to my supportive husband Kenneth Larimer who would ask me many times, "Are you done yet?" hoping I could go do something fun with him. It's over now, let's go to a movie! Thanks to my brother, Kevin Glassburn, my sci-fi buddy and my rock. I know I can always count on you. Thanks to my wonderful, caring BFF, Judy Davis, who has always got my back. I've got yours too, my friend! And Danny Clymer, thanks for being a wonderful supportive friend who was already ready to give me a neck massage when I was hurting from hunching over my keyboard. And of course, my faithful dog Macy, who was by my side during the hundreds of hours I spent on the computer. I owe you a bunch of walks in the park!

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Susan Larimer

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Every year, more than 200 schools of social work graduate thousands of Master of Social Work (MSW) students. These graduates enter the world of work and continue on their journey toward becoming professional social workers. Surprisingly, very little is known in social work about the transition from student to professional, especially for MSW graduates. Related literature in nursing and education is reviewed in order to have a foundational knowledge of the transition process for similar professionals. The research questions for this study were: (a) What is the process of transition from student to employee like for new MSW graduates? (b) What are the factors that influence this transition during the first 18 months for MSW graduates? and (c) Are there critical junctures in the processes of transitioning from being a student through the first 18 months of MSW employment that are related to satisfaction and/or professional growth?

This dissertation used qualitative, constructivist grounded theory methodology in order to study this relatively unknown subject. The conceptual model that emerged in this study is called *Riding the Waves*, and illustrates the transition process for new graduates learning to become a professional social worker. There are five stages of this model: Testing the Waters, Jumping In, Sinking or Swimming, Treading Water, and Riding the Waves. In Testing the Waters, critical issues of finding a job, negotiating a salary and licensure are salient. In Jumping In, new graduates experience orientation, examine preparedness from school and encounter the real world of work as opposed to

their expectations. In *Sinking or Swimming*, new graduates negotiate not knowing, supervision, dealing with emotions and difficult work situations. In *Treading Water*, new graduates explore finding a balance between self-care and compassion fatigue and articulate job and compassion satisfaction. In the last stage, *Riding the Waves*, new graduates are more stable, gain confidence, find their voice and discuss what is ahead for them. Implications for social work students, educators, and employers are discussed including better preparing students for the transition, improving orientation and supervision, and providing the support that these new professionals require and deserve.

Kathy Lay, MSW, PhD, Chair

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Chapter One: Introduction

Students who obtain a Master of Social Work (MSW) degree most likely have an interesting story about their experience in their first job out of graduate school. Those stories paint a picture of the experience of being a new MSW, and likely they are full of excitement and exhilaration, but also may contain anxiety, fear and frustration. Those stories are unique, and in their own ways tell of having to deal with complexity, diversity and personal and professional emotions. Scott, Engelke, and Swanson (2008) state, “The first year in a profession establishes an individual’s career framework and influences long-term professional development and satisfaction” (p. 75). Many social work faculty hear anecdotally about wonderful and horrific first job or year experiences, but have no knowledge about whether those experiences are the norm or are aberrations. My curiosity became peaked about these experiences in my role as an advisor for an MSW program as I would routinely hear about the joys and the frustrations of our recent graduates. I reflected on my own experience as a brand new MSW, which was difficult yet exciting, and wondered what kind of research existed about this time of transition. My findings surprised me, as there was very little literature in the field of social work that explores this experience. This lack of research was not restricted to those with an MSW but also those obtaining a Bachelor’s in Social Work (BSW). However, there is considerable literature about new professionals in other areas, such as nursing and education. These related professions have obviously placed value on understanding the transition experience of their new graduates because of what that experience says about the quality of academic preparation and also what it means for the career trajectory of the developing professional and the people and systems they will impact. If new graduates

are dissatisfied with their first job experience, they could decide to leave that job, creating turnover, client dissatisfaction, and expense, or even decide to leave the profession altogether. As social workers, we have a vested interest in wanting our new professionals to grow and mature in order to ensure the provision of competent services and the continuity of our profession in society. This research project explored the journey of that transition experience for new graduates.

Why Be Concerned about New Graduates?

The 227 accredited Master of Social Work (MSW) programs in the United States produced 22,441 MSW graduates in 2012 (Council on Social Work Education [CSWE], 2012). Enrollment in 2012 in MSW programs was 53, 835 for full and part-time students combined (CSWE, 2012). Approximately 35% of these students are from historically underrepresented groups. For a demographic profile of enrolled full and part-time MSW students in 2012, see Appendix A. This is a significant number of graduates each year, as well as a large number of students in the academic pipeline, and would seem to warrant further examination into the experiences of these students post-graduation.

The transition from student to professional social worker is a journey upon which nearly every MSW graduate embarks. However, a literature review conducted for this dissertation of articles published in the last 30 years yielded only nine articles which explored the transition from social work student to employee, and none of the articles specifically examined graduates who received an MSW degree. Also, only one of the studies was from the United States; the others were from the United Kingdom and Australia. This is an important distinction as social work education differs from country to country in terms of educational requirements and context for work. Clearly, there is

very little in the social work literature about the transition experience of new BSW or MSW graduates. It would seem that with the large number of social workers graduating each year, the profession should have a vested interest in understanding how their graduates fare after the cap and gown have been retired to the closet.

Social work as a profession is projected to grow by 25% between the year 2010 and 2020, which is faster than average compared to other occupations (U.S. Department of Labor & Bureau of Labor Statistics, 2014). Because of this need for more social workers, the National Association of Social Workers (NASW) has engaged in a study regarding workforce development (Whitaker, Weismiller, & Clark, 2006). The authors identified several threats to the social work workforce: replacing retiring social workers, recruiting new social workers, and retaining current social workers. In the area of retention, they found several concerns:

Although most social workers express satisfaction with their career choice and aspects of their practices, too many become discouraged by agency environments that are unresponsive to their needs for professional growth, respect and fair compensation. A profession cannot successfully retain its workforce when issues of personal safety go unaddressed. In addition, increases in demands on workers accompanied by decreases in supports not only frustrate practitioners, but ultimately drive them away from the field. (Whitaker et al., 2006, p. 35)

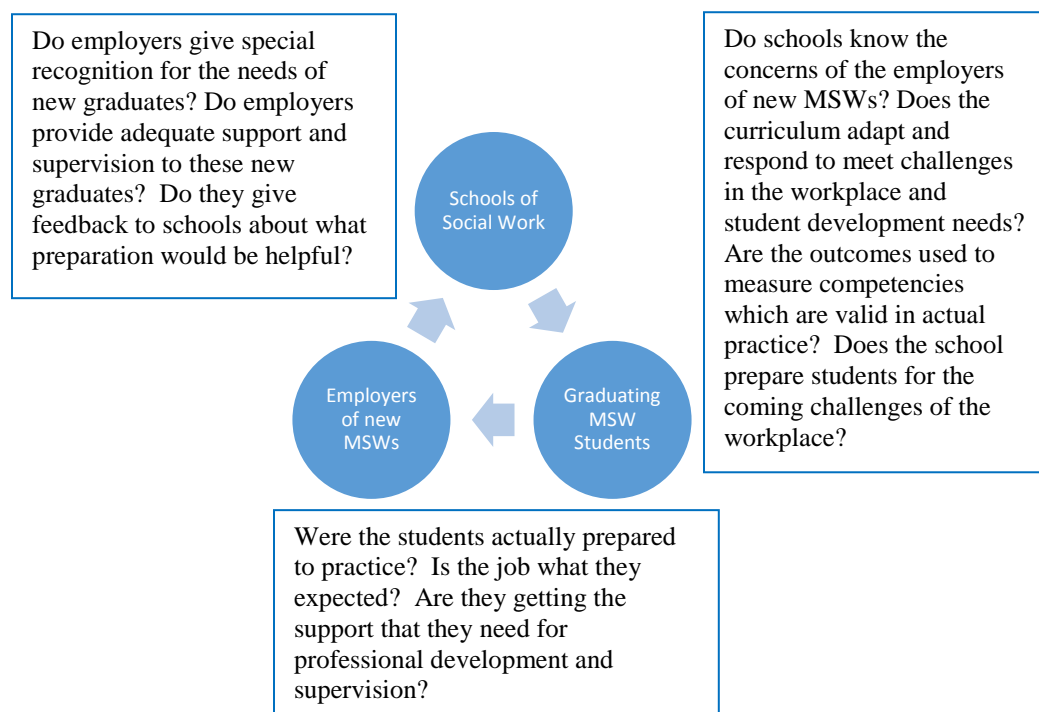
While these concerns are not solely about new graduates, these comments are critical for the continued growth of the profession, since new social workers entering the field are the foundation of the future workforce. If workplace environments like the ones

described above are not remedied, the field of social work may have trouble attracting new prospects and retaining its current workers.

Social work educators also have a vested interest in understanding the experience of our new MSW graduates. In 2008, the Council for Social Work Education (CSWE) changed its accreditation standards from mandating content requirements to a more flexible competency-based education, as is prevalent in other disciplines (Holloway, Black, Hoffman, & Pierce, 2013). The goal of this change was to enable schools of social work to better innovate in curriculum design and to make sure that graduates are prepared to practice (Holloway et al., 2013). To that end, CSWE established ten competencies that all graduating students must meet in order to be ready to practice. However, if educators do not know the obstacles and the challenges that new graduates face in their first year or two of employment, then how do they know that these competencies are actually preparing them to practice? There needs to be a feedback loop between employers of new graduates, the new MSWs in their first year of employment, and the academics that are preparing them for practice (see Figure 1). Employers should communicate to educators any perceived gaps in student preparation so that those content or practice areas could be included in curriculum development. Educators should also prepare students for the reality of the workplace, and to do this, should have dialogue with employers so that current workplace contexts and challenges for new social workers can be explored prior to graduation. Employers need to also have dialogue with their new social work employees in order to better understand what supports they need and what challenges make the transition from school difficult. New social workers may not know what they do need, and may not know what they are missing. Unfortunately, they

may assume that transition problems may be more about their own personal failings instead of systems that do not collaborate in order to support their transition process. At this point, the professional literature does not contain enough information about new MSW graduates to inform schools of social work about the process of becoming a competent and confident MSW.

Figure 1: Conceptualizing the Feedback Cycle between Stakeholders for Developing Competent MSWs



Broadening the Scope of Inquiry

It is striking to contrast the literature on new MSW graduates with similar professions, such as nursing and education. Both nursing and education have similarities to social work in that they have coursework and practicum experiences (clinicals and student teaching) that help students apply what they have learned in the classroom to the field. Both new nurses and teachers have to jump into their first job and practice competently, managing multiple demands while working directly with people for the

majority of their days. Both nursing and education have extensive literature on the experiences of the new nurse and the new teacher, and both of those professions worry about the phenomenon of “eating their own young” (Anhorn, 2008; Hippeli, 2009) and making sure that new professionals receive the proper support to succeed in their job and stay in the field. Due to high levels of turnover and attrition, nursing and education have implemented transition support programs to better support their new professionals. These will be discussed in more depth in the literature review.

Area of Focus for Study

The concept of a transitional journey is a useful concept when trying to understand what happens to new MSW professionals after graduation. Duchscher (2009) explains this transition in the field of nursing as the “in-between ness” of the journey and defines it as “the process of moving from the known role of student to the relatively less familiar role of professionally practicing nurse” (Duchscher, 2009, p. 1105). Duchscher (2008) has developed a theory which encompasses the entire first year for new nurses called *The Stages of Transition Theory*. The Duchscher model is but one example as there are at least 50 studies and articles regarding this transitional period in nursing. Examining this transition is relatively new in social work, and it was the goal of this dissertation to focus on this transition for new MSWs as they graduate and begin their employment in the workforce for the first 18 months.

Research Questions

The purpose of this study was to understand the journey that new MSW graduates experience as they transition from student to working professional in their first 18 months after graduation and to explore what contributes to professional satisfaction and

development. The research questions were: (a) What is the process of transition from student to employee like for new MSW graduates? (b) What are the factors that influence this transition during the first 18 months for new MSW graduates? and (c) Are there critical junctures in the processes of transitioning from being a student through the first 18 months of MSW employment that are related to satisfaction and/or professional growth?

Research Methodology

Because there is little research in this area, qualitative methods are most suited to exploring this topic in more depth in order to gain a nuanced understanding of what the experience of transition is for new graduates. Constructivist grounded theory (Charmaz, 2014) sees the researcher as co-constructing the data along with participants and acknowledges the inherent subjectivity of the researcher, all the while understanding the experience of the participant. Grounded theory has several defining features. Data is collected and simultaneously analyzed in a comparative fashion to other data. The focus is on identifying a process. Data are analyzed systematically through the use of coding, beginning with line-by-line initial coding, and then to focused coding, and finally to more theoretical coding. Memo writing is used throughout the process to engage in dialogue with the data and facilitate the emergence of process and grounded theory (Charmaz, 2014; Saldaña, 2013).

Role of the Researcher

As an MSW graduate myself more than 25 years ago, my recollections of my first year are still relatively clear. I can remember feeling very tentative and finding my way through what my job required, and trying to figure out what were appropriate boundaries

to set with clients, colleagues and supervisors. I remember my emotions being very high as I was anxious about doing a good job and then simultaneously dealing with all the emotions of my clients. I also recall the struggle of trying to balance work and life in a way that was healthy. As an advisor at a university, I listened to students talk about their career aspirations, and would hear from them after graduation in their first job about the joys and struggles they were experiencing. This dissertation study is an intersection of my interest in the experience of transition since I have personally experienced it and professionally have watched new graduates go through this process as well.

Researcher Assumptions

My assumptions about this research are: 1) that my own experience is a part of hearing the participants' experiences and a lens that I cannot discard, but can acknowledge, 2) that the stories the participants tell me are their own construction of their experiences and are not viewed as objective truth, but their truth, and 3) that by hearing the stories of all of the participants, that I will be able to see commonalities and develop a model of the experience that will have resonance with the participants themselves and to multiple audiences.

Definitions of Key Terminology

Master of Social Work degree: Most programs in the United States are 60 credit hours of coursework and practicum experiences. Students may enter with a bachelors' degree in any field, but if the student has a recent bachelor of social work they could qualify for credit towards the Master's, thereby shortening the length of the program. MSW programs in the U.S. are applied, that is they seek to give the students skills to practice with clients and organizations at micro and macro levels of experience.

New MSW: A new MSW is defined for the purposes of this study as a person who has graduated from an accredited Master of Social Work program and has been working in a social work job for at least nine months to no longer than 18 months.

Practicum: Students in MSW programs are required to complete one to two experiences of internship in an agency setting under the supervision of another MSW. In this case, students had to select a specialization in their final year which could include health care, mental health, child welfare, schools or leadership areas.

Organization of this Paper

This study is presented in five chapters. This chapter (one) is an introduction to the topic, including the background, research questions, and methodology. Chapter Two is a review of the literature and a conceptual framework for the study. Chapter Three details the methodology and the methods used in this particular study. Chapter Four presents the findings from the study, including the participants' own voices. Chapter Five offers a discussion of the study findings, implications for practice, limitations, recommendations for future research, and a conclusion.

Chapter Two: Literature Review and Conceptual Framework

Relevant social work literature on the experience of new graduates will be explored in this chapter; however, due to the lack of much social work specific research, I will also look at two other professions that are similar to social work and have a much larger and richer body of knowledge about their new graduates. The research in the disciplines of education and nursing may have applicability and transferability to social work. These fields in particular are similar to social work in that students have practicum experiences/student teaching/clinical during their educational curriculum and must integrate knowledge, communicate effectively with clients (patients, students), and exercise professional judgment in interprofessional settings. All these professions are guided by the concept of praxis, which is “a form of action in which a wise and knowledgeable individual acts in the best interests of the group, the situation or the self” (Barretti, 2004, p. 256). All disciplines agree on the importance of supporting new novices to the profession, yet social work in particular has not produced much scholarly research on this time of transition. In the field of education, Shoffner (2011) pointed out that new teachers have the same job responsibilities as veteran teachers, but they must negotiate the learning curve of being new in addition to all of their job responsibilities. In the nursing field, Anderson, Linden, Allen, and Gibbs (2009) discussed that new graduate nurses’ first jobs shape their “perceptions of nursing roles, professional growth, and job satisfaction” (p. 165). Koerin, Harrigan, and Reeves (1990) state that even though social work educators cannot control this transition from student to employee, faculty and field instructors have the responsibility to facilitate this transition and help students with specific strategies for successfully engaging in this transition. O’Connor and Dalglish

(1986) agree that it is the obligation of social work educators to adequately prepare students for the challenges of practice, although there is little research to know or evaluate whether or not this is happening.

In evaluating beginning practitioners' views and needs, each of the three disciplines has some research on their new graduates, although very little of this research is specific to master's level students. Undergraduate students are most often the scope of the research in all areas since both nurses and teachers do not often practice with a master's degree without already practicing with a bachelor's in that same field. Social workers can practice with an MSW without any prior work experience in social work at all. While each profession has its own unique characteristics, there is also overlap when discussing the process of transition for new graduates which makes this related research relevant to social work. The following is an overview of the research in each profession about their new graduates. Subsequent to this discussion, theories which support the concept of transition from student to professional will be explored.

Social Work and New Graduates

A review of Academic Search Premier in 2015 (EBSCOhost with expanded databases) found nine studies discussing new social work graduates and their beginning experiences as employees. The search was conducted using terms such as new social worker, newly qualified social worker, preparedness, orientation or induction, transition from student to professional, and related terms. Inclusion criteria for this search were any studies since 1985 in English and those which looked at any new graduates, regardless of whether they were master's prepared or undergraduates. Since much of the research identified was from the U.K., their definition of newly qualified social workers is those

with a three year undergraduate social work degree, which also requires some general education courses before being admitted (National Careers Service, 2012). Since there are so few social work studies, a review of each is helpful in looking at the current knowledge base on this topic for the profession. They are presented chronologically.

O'Connor and Dalglish (1986) looked at the first eight months of employment for 15 undergraduate social workers in Australia and examined whether or not their expectations for work became the reality of their experience. They found that social work graduates did not feel prepared for the agency environment despite having had practicum experience. The new undergraduate students particularly had difficulty with the organizational context of practice and with feeling isolated and lacking in support. They also reported experiencing some disconnect between their ideal social work selves and their present social work selves, which the authors felt is consistent with an experience of reality shock.

Koerin, Harrigan, and Reeves (1990) in a non-empirical study, discussed a conceptual model for the transition from student to professional, Schlossberg's model of transition, and applied it to younger BSW and MSW social work students in their transition from student to professional. They concluded that three primary factors are responsible for the outcome of the transition: 1) the type, context, and impact of the transition, 2) the personal characteristics of the individual in transition, and 3) environmental factors, such as social support and job market. The authors encouraged social work educators to try to simulate real world environments for students in the classroom in order to better prepare them for the realities of practice, and to potentially assume a broader role in assisting students to make a successful transition.

More recently, three social work authors have looked at the experience of new social workers as they transition from student to professional. Bradley (2008) looked at the process of induction for ten new social work employees (undergraduates) in the U.K., or what is referred to in the U.S. as the official orientation to a new job. The students found that observation of experienced practitioners, supportive supervisors and co-workers increased their comfort and commitment to their jobs. Overall, social workers did not get the support that they needed during orientation and the need for a more formalized orientation was recommended. Bradley (2008) also felt that social work faculty should function in the role of a tutor to graduating students and help prepare them for practice. Agllias (2010) explored the expectations of undergraduate social work students in Australia prior to graduation, and compared those with perceptions of those who had been employed (from two to 28 months) about the reality of the workplace and the degree to which they felt prepared. In this study, students felt that field experiences did not truly prepare them for the ethical issues in the workplace and the busyness of the workplace. They also reported feeling very professionally powerless in the workplace. In addition, the quality of the supervision they received was critical to the work satisfaction of the new graduates.

Bates et al. (2010) looked at the first year of newly qualified undergraduate social workers in the U.K. In response to several high profile disastrous child welfare cases, agencies developed structured induction, or orientation, programs which sought to better prepare graduates for their first position. This study followed 22 students in their first year at three different data collection points. The lack of a structured orientation was very common and some graduates said that they felt they were just thrown into their job

like a “baptism by fire” (p.162). They identified several key skills as needing further development: assessment, report writing, record-keeping, and court skills. There were several gaps in preparedness, which raised the issue of whose primary responsibility it is to prepare social workers with the practical skills needed for their first job—social work educators or employers?

Jack and Donnellan (2012) also followed newly qualified social workers (undergraduates) in the U.K. through their first year on the job in child welfare. They used both a questionnaire and two interviews to find out about the first year experience of 13 new social workers. Several themes emerged from their study. There was a definite loss of job satisfaction as the year went on, mostly due to the stress of the work in child welfare. There was also an experience of reality shock when they realized how responsible and accountable they now were versus the student role. Several tensions were obvious, mostly in regards to the quantity of the work versus the quality of the work. The nature of the work in child welfare was particularly stressful and contributed to dissatisfaction with their jobs. Overall, the new social workers were optimistic and confident when beginning their jobs, but over the course of the year the workers felt that their organization failed to recognize that they were human beings and “needed to feel that their employers appreciated the difficult job that they were doing, and were committed to providing the resources and support necessary to enable them to do it well” (Jack & Donnellan, 2010, p. 317). Donnellan and Jack (2011) also wrote a survival guide for newly qualified social workers, *The Survival Guide for Newly Qualified Child and Family Social Workers: Hitting the Ground Running*, which provides preparation in order to avoid reality shock about what to expect during the first year.

Moriarty, Manthorpe, Stevens, and Hussein (2011) from the U.K. compared the literature on newly qualified social workers (undergraduates) with that of other professions to look at similarities and differences. They reviewed literature in nursing, education and allied health professions, and found that difficulties in the measurement of the concept of preparedness made coherent conclusions difficult. They found there were similar tensions between academia and employers in terms of preparing students for practice across all disciplines. They found that transition models were used in nursing and other areas, but had not been researched for social work in the U.S.

Two very recent studies reflected on the experience of new undergraduates' perceptions of preparedness. Tham and Lynch (2014) interviewed 13 Swedish undergraduates while in school and then again at 18 months of employment. They found that the students wished they had more reality-based education, which meant more time in practicum (which is very short in Sweden), more practical skills training while in school, and more contact with actual practitioners coming in to talk to them while in school. Hussein, Moriarty, Stevens, Sharpe, and Manthorpe (2014) examined what factors contributed to new social worker's intention to leave their jobs. They surveyed 280 newly qualified social workers (bachelor's level) in the U.K. before graduation and again at 18 months of employment and found that the two biggest predictors of job satisfaction were the importance of team support and self-efficacy, in which the social workers felt involved, their values were honored, and they had autonomy. They propose that job engagement was a more important predictor of satisfaction than size of caseload and salary. Satisfaction about preparation from school was also linked to job satisfaction.

The majority of these studies looked at the concept of preparedness, and whether or not students felt that they had adequate preparation in their university program to perform well on the job. They also looked at the orientation process on the first job and the actual skills the new social workers possessed and whether there were areas of deficit in their new positions. Only one study (Koerin et al., 1990) looked at a conceptual model for the transition period from student to employee.

Unanswered Questions about Social Work Graduates

Only one of the above studies included MSW students (Koerin et al, 1990), so there are many unanswered questions about the transition from student to professional for MSW graduates. It is a realistic assumption that new MSW graduates would engage in more clinical work (counseling, therapy) with clients than their undergraduate counterparts, so it would be interesting to see what kind of supports are helpful to them, how prepared they felt for the responsibility of practice, and what satisfiers and dissatisfiers there may be in regards to their positions. It would also be interesting to see how long new MSWs stayed in their first position, and if they do leave within the first year, the reasons behind this decision. Also, two studies (Jack & Donnellan, 2010; O'Connor & Dalglish, 1986) mentioned the concept of a reality shock experience for new social workers, much like that documented in nursing (Kramer, 1974). It would be important to ascertain if the concept of a reality shock mentioned for social work is more pervasive, or if those were isolated experiences.

It is significant to note that there has not been any research on the transition of social work graduates into the workforce in the United States since 1990 (Koerin, Harrigan, & Reeves, 1990), and that article was merely conceptual and not an actual

study of graduates. It is interesting that U.S. social work scholars have not explored this topic; much of the research is from the U.K. and Australia. Several high profile child deaths in the U.K. welfare system have spurred on the professionalization of social work in the U.K., and a new degree program was initiated in 2006. There has been great interest as to how graduates of this new undergraduate degree have transitioned into the workplace and how well they are doing as employees (Jack & Donnellan, 2010). There are many knowledge gaps in this area of research as the concept of a transition, let alone a successful transition, for new professionals has largely been ignored in social work as a whole and in the U.S. in particular.

Education–New Teachers

The educational curriculum for new teachers includes classroom learning as well as student teaching experiences. This is similar to social work, in that students have a mix of classroom learning and practicum experiences. Both professions require the ability to work with clients/students and conduct assessments, develop plans for intervention, and perform an evaluation of those activities. Both teachers and social workers work with a variety of age groups (parents, grandparents, all ages of children), and need to understand diversity and how to work with others that are different from themselves. Both also have the experience of having to manage a caseload (or classroom) to the best of their ability, putting into practice what they have observed, learned, and experienced.

In the area of education, several studies talked about the importance of understanding the experience of new teachers, especially in regard to what supports new teachers need to be successful and to stay in the field. New teacher attrition is very high,

with 40-50% of new teachers leaving the field within the first five years (Fantilli & McDougall, 2009). Because of this attrition, several research studies investigated how to better support new teachers. First-year teachers in the Marable and Raimondi study (2007) found the following to be the most helpful during their first year: a mentor, supportive colleagues, administrative support, specific training, and curriculum materials. They conducted focus groups of first year teachers and found the following issues were very important in retention: orientation, time, isolation, classroom management, pay and benefits, the principal, fellow teachers, parents, and preparation for teaching. Fantilli and McDougall (2009) echoed the importance of intentional ways to support new teachers such as mentoring and special programming.

There is also literature regarding what issues teachers find difficult in their first year. Anhorn (2008) refers to teaching as the “profession that eats its young” (p. 15) acknowledging the lack of support given to new teachers. Marable and Raimondi (2007) identified that the least supportive factors for new teachers were administrative politics, ineffective training, unhelpful supervision, lack of materials for teaching, unhelpful colleagues, and unhelpful or unavailable mentors. A comprehensive survey by the National Comprehensive Center for Teacher Quality (2008) of 641 first year teachers found that while teachers felt confident about their ability to teach and manage a classroom, issues of diversity and special needs children were more difficult than anticipated and they felt they needed more training and support in those areas. Bang, Kern, Luft, and Roehrig (2007) discussed the first year for new teachers and found that those who left the profession cited reasons of unsupportive administration and colleagues, issues with certification, financial concerns, and personal reasons. Kardos and Johnson

(2007) report that often teachers work in isolation, and they lack the support of an integrated culture which includes teachers of all experience levels and administration.

In summary, there is considerable research on the experiences of new teachers. Due to the high number of teachers who leave the profession, much research has been dedicated to understanding the risk and protective factors for retention, as evidenced by the structured mentoring programs put in place.

New Nurses: Stressful Transitions

Studies of new nurses seem to fall into two categories: those that focus on the inherent stress of going from student to professional, and those that propose conceptual models of the transition process itself from student to employee.

Stress. Within the first year of employment, new undergraduate nurse turnover ranges between 35-60% (Halfer & Graf, 2006), so the importance of exploring the experience of new nurses is critical to the financial success and maintenance of quality patient care for health care organizations. Several studies have focused on the stress that comes from being a new nurse. Ellerton and Gregor (2003) studied nurses in their first three months of employment, and found that more than half of the nurses described themselves as “overwhelmed by the volume and complexity of work and frustrated with clinical situations for which they lacked knowledge and skills, and the confidence to manage safely and independently” (p. 105). Bowles and Candela (2008) found that high nursing turnover was directly related to patient care issues, such as unsafe nurse-to-patient ratios. Casey, Fink, Krugman, and Propst (2004) talk about the stressful nature of the transition from student to professional. Their results suggest that new graduate nurses

do not feel skilled, comfortable, and confident for as long as one year and called for more organizational support for these new nurses in order to avoid turnover.

Kelly and Ahern (2009) identified some negative cultural aspects faced by new nurses in their first six months on the job, such as feeling like they were just “thrown into the deep end” to sink or swim, and experiencing little assistance from other nurses.

Using qualitative grounded theory, Mooney (2007) found the majority of new nurses often felt frustrated, vulnerable, stressed and disappointed in their new job. Instead of becoming more assertive, they acquiesced to the powerful nursing culture that was not necessarily helpful or conducive to personal growth. Hinds and Harley (2001) interviewed new nurses and found that cultural acceptance was the most important theme for these new nurses, even more so than maintaining the beliefs and values they had internalized as students. Unfortunately, the nursing culture of some organizations can be hard on new nurses in particular. Simons (2008) found that of 544 new nurses surveyed, 31% reported being bullied, and bullying was a significant predictor of nurses leaving the organization. The authors also talked about how new nurses experienced workplace bullying. These nurses did not experience this cultural aggression as nursing students and therefore had considerable reality shock when they began working in their first nursing jobs in the nursing culture that they had to join to survive. In that same vein, McKenna, Smith, Poole, and Coverdale (2003) looked at the prevalence and impact of this workplace bullying on new graduates. They found that one-third of the new graduates experienced some horizontal violence (between co-workers) in their first job, and half reported a lack of supervision. Most of the behaviors were covert, but there was a significant amount of rude, abusive or humiliating verbal behavior.

It is apparent that being a new nurse can be a very stressful experience, and that several factors contribute to this stress. The work itself can be very stressful, especially for nurses that often deal with life and death circumstances. Small mistakes could result in life-altering outcomes. Also, there is considerable literature on the culture of nursing, particularly bullying and peer conflict, which would add to the already considerable stresses for new nurses. There is nothing in current literature about whether new social workers face anything similar to nurses in terms of an extremely stressful work environment or peer bullying.

Transitions. A search of nursing literature for the past twenty years yielded more than 50 articles regarding new nurses and their transition into the profession, specifically in their first year or two of practice. All of the articles acknowledge the significance of this transition and yet Morrow (2008) says that “Despite the plethora of international literature over the past three decades, the experience of graduate nurses has not improved; they continue to be a marginalized and disenfranchised population” (p. 280). Much of this literature examines the concept of a transition period for nurses in which they go from brand new graduates to beginning professionals. This time period is often conceptualized as taking from one to two years. The seminal work often cited by others is the work of Kramer (1974) who talked about the phases of transition that new nurses go through: the honeymoon phase, disorientation and disillusionment, and then recovery and balance. Kramer coined the term “reality shock” to describe the experience of new graduate nurses after their initial enthusiasm and excitement dissipates and they face the reality of their new work responsibilities. In this model, nurses must go through feeling worse before they begin to feel better about their positions (Kramer, 1974).

Benner (1984) also strongly influenced this area of study with the publication of a seminal book in 1984: *From Novice to Expert: Excellence and Power in Clinical Nurse Practice*. Benner's qualitative study drew upon the work of Dreyfus and Dreyfus (1980) who studied skill acquisition and progression in chess players and airline pilots. Benner (1984) applied their theory to skill acquisition in new nurses as they moved through five stages of proficiency: novice, advanced beginner, competent, proficient, and expert. Benner was curious as to how nurses moved from one level to the next, and the teaching and learning needs at each stage of development. She felt that new nurses need two to three years to become competent practitioners. Much of the nursing research on the transition builds upon Benner's work.

Many nursing studies, both qualitative and quantitative, have sought to understand what happens to new nurses during this transition period in terms of their sense of belonging and emotional connectedness to the profession. Halfer and Graf (2006) conducted surveys at multiple intervals with new nurses throughout their first 18 months of work. Consistent with Kramer's work (1974), they found that nurses became more distressed after the initial orientation period and struggled with multiple demands and expectations, taking 18 months to become more stable and comfortable in their jobs. They also identified a grieving process as nurses moved away from their academic experience and into their work experience. McKenna and Newton (2008) explored how new nurses developed their knowledge and skill over the first 18 months following graduation, and they were particularly interested in the period of time after the first year in the workplace ended. Important themes that emerged from interviews with nurses who had been in their jobs about 18 months included: Relationships or a sense of finally

feeling like they belong, independence and gaining competence, and moving on and providing support to others. In a qualitative study of new nurses three months after graduation, Ellerton and Gregor (2003) found that new nurses were more focused on skill development and routine than on communication with patients and families. Scott et al. (2008) found that a good orientation is the essential factor in nurse satisfaction in their first year or two of work. They also identified two critical issues as the development of confidence and competence for new nurses. Wangenstein, Johansson, and Nordstrom (2008) found three primary themes in their qualitative study about the transition to employment: the experience of being new, gaining nurse experience, and gaining competence. The participants described the initial period in their first job as being very difficult, but saw it as a part of the learning process. Clearly transition is a process which requires time, skill acquisition, and confidence-building experiences.

Several nurse researchers have proposed stage models to help explain the process of the transition from student to employee. Schoessler and Waldo (2006) present a process model for new graduates that begins with *focusing on the end* of being a student, followed by being in a *neutral zone* in which new nurses are navigating new rules and roles, and finally entering the *new beginnings* stage in which nurses feel they have “made it” (p. 48) and feeling more competent and confident. The *Stages of Transition Theory*, developed by Duchscher (2008), depicts the multiple transitions through which new nurses progress. The author found that new nurses go through three stages in their first year on the job: Doing, being, and knowing. She details many different issues that new nurses face during their first 18 months such as knowledge deficits, confidence in their skills, collegial relationships, organization and prioritization of demands related to patient

care, and communication with physicians. As grounded theory was used to develop a unique theory of transition, this model will be explored more in the theory section.

Conceptual Model for This Study

In situating this study, it is helpful to understand relevant theories that frame the concept of transition, which is the focus of this study. Several theories are useful in examining this transition process: Role theory, social learning theory, the Dreyfus Model of Skill Acquisition, and Benner's application of the Dreyfus model to nursing, and Schlossberg's model of transition. An example of grounded theory developed by Duchscher (2008) will also be explored as an example of a model of the transition experience in nursing.

Role theory. The transition from student to employee demands a change of roles, role expectations, and role performance. Role theory addresses roles, transitions, role strain, role ambiguity and other constructs which reflect the shifting nature of people's places in the world (Kimberley & Osmond, 2011). People's perceptions about the immutability of these roles are connected to their ability to adjust to new and changing aspects of their lives (Payne, 2005). Role theory is a social constructivist way of viewing the different roles that people play in the various relationships that they have with others and their environment, some of which may be dysfunctional and some of which may be productive (Kimberley & Osmond, 2011).

Role conflict and ambiguity are hallmark characteristics of a transition from student to new professional. The role of student and learner must shift to that of productive employee relatively rapidly, and that shift in roles may be difficult for new graduates to manage. Also, the vast majority of social workers function in

interdisciplinary teams, and this may make it more difficult to establish a social work identity. Abramson (1993) believes that the desire for acceptance motivates the new social worker to adapt to the team, which may enable them to lose the unique voice that they bring to the interprofessional culture. This could also impact the social worker's ability to be an advocate for a client in the climate of a more pessimistic team perspective.

An important part of the work for new graduates is assimilating into the role of new MSW employee. In nursing literature, there is an exploration of role expectations and role socialization and how these constructs involve the development of professional identity (Duchscher & Cowin, 2004). Duchscher and Cowin (2004) describe several professional identity issues as new nurses find their enthusiasm and commitment to patients often in conflict with the need for efficiency and organizational culture. New nurses face the dilemma of the ideal of practice taught in school with the reality of practice they encounter in the workplace which makes for some role confusion.

Role ambiguity in general is disconcerting, and new social workers may struggle to figure out what their role is in the agency, and what the spoken and unspoken expectations are for their position. There may also be some difficulty letting go of the student role and assuming the employee role as both are seen very differently in an agency. It is fine for students not to know many things, but new social workers may feel that they will be seen as incompetent if they admit that they do not know something (Kimberley & Osmond, 2011). Role strain happens when there are differences between the required role and the desired role. O'Connor and Dalglish (1986) reported role conflict for younger social workers between their perceived ideal social work role, and

the role that they were functioning in at that time. Agllias (2010) discussed this issue in regards to the new social workers interviewed in the study. New social workers were disappointed that they were not able to do more family and group work, and instead found that they were doing much more case management around getting transportation and accommodations for people (Agllias, 2010). This can result in considerable job dissatisfaction. There may also be conflict for the new social worker in an organization as they struggle with interprofessional roles and the boundaries of each discipline. This is often a very difficult concept for new graduates as they struggle to decide whether to defend their turf or become flexible in how they view their roles and those of others (Abramson, 1993).

Social learning theory. Social Learning Theory is very applicable to the transition from student to new graduate as concepts of modeling and self-efficacy are very important in the beginnings of constructing one's professional identity (Payne, 2005). New social workers may learn how to act in their agency setting by watching others' behaviors, paying attention to the consequences of those behaviors, and discerning which are rewarded by the organizational culture and management. New social workers also need a belief in their own self-efficacy as confidence is a critical part of negotiating a new role and putting new skills into action.

There are three critical components to social learning theory, and they include operant learning, respondent learning, and observational learning. Observational learning, which can also be called modeling, is a critical way of acquiring learning by imitating the behavior of others (Thyer, 2011). Payne (2005) says that modeling is the main process in social learning theory. Modeling involves someone else performing an action for an

observer. This observer forms an idea about how the behavior is done, in what circumstances it works, and the consequences of the behavior so that the observers may repeat the behavior in subsequent situations. Thyer (2011) cites Fischer and Gochros (1975) as to how modeling can be facilitated in certain conditions: Use models that are important to the observer, show the model being reinforced, use repeated modeling experience, and graduate practice exercises from less to more complex. These are important concepts for new social workers as they often use field instructors and supervisors as role models for appropriate professional behaviors, and may be disillusioned when those role models do not behave as they would ideally expect.

Barretti (2007) conducted a comprehensive literature review in social work on the issue of role modeling. The review found that there is empirical support for the efficacy of role modeling in teaching students clinical skills and in field education. However, there is currently no agreed upon definition as to what characteristics constitute being a good role model, or a consensus about how role models actually influence students. A prior study by the same author found that in social work, “Role models provided motivation, influenced career directions, and helped students make crucial developmental changes while negotiating the ambiguities and tension in their education” (Barretti, 2007, pp. 230-231) However, there is a paucity of social work research in this area, and only the Barretti (2004) study explored the connection between students and their role models and the ways in which these role models impact social work education.

Bandura (1986) is also a contributor to social learning theory and is credited with the origination of self-efficacy theory. Self-efficacy theory calls for the “continuous improvisation of multiple sub-skills to manage ever-changing situations, most of which

contain ambiguous, unpredictable and often stressful elements” (Bandura, 1997, p. 37).

This process sounds much like what new professionals experience on the job, so this theory seems particularly relevant to the journey of new MSWs. New social workers can gain self-efficacy through exposure to helpful supervision, organizational culture, and supportive peers. Self-efficacy scales have been used to measure the degree of self-efficacy that social work students perceive themselves to have during their educational process (Holden, Meenaghan, Anastas, & Metrey, 2002). However, this theory has been criticized on the grounds that belief in one’s self-efficacy is not a predictor of future behavior. Confidence alone is one component of a developing professional. There may be other individual and cultural factors which are not accounted for which predict behavior (Farkas, 2011).

The Dreyfus Model of skill acquisition–Benner’s application to nursing.

Dreyfus and Dreyfus (1980) developed a theoretical model about the acquisition and development of skills for those new to a profession. The five stages of this process are: Novice, advanced beginner, competent, proficient, and expert. These stages begin during school, but continue throughout a lifetime career trajectory. In fact, whenever a person learns a new skill, regardless of expertise in other areas, they become a novice in the new area again. These different levels reflect different shifts in focus, from relying on abstract principles learned in books and in the classroom, to using past experience to guide decision- making. With time, the learner also goes from seeing pieces of the whole to understanding the connectedness between the knowledge and skills they are acquiring. The learner also progresses to become more involved as a participant and not simply as an outside observer of their environment as they progress (Benner, 1984). Benner (1984)

undertook a comprehensive, qualitative study of new nurses to test the applicability of the Dreyfus model. She found that the model did indeed help identify differing competencies and learning needs for nurses who were at each level based on different nursing areas. Her model has implications for how nurses at higher levels of proficiency could assist those at lower levels to move to greater integration of knowledge and practice. Her model also has implications for social work educators in being able to prepare students for the progression they will experience as they move forward in their career, and determine what they need at each level in order to move to the next.

This model of learning has not been applied to social work, and a further examination of each of these levels may be helpful in thinking about its application for our graduates. The novice is taught how to handle situations by using more objective tools and assessments, tools that can be used without situational experience. Novices are taught what Benner calls “context-free rules” (Benner, 1984, p. 21) to help guide their action in different situations. An example of this for social work might be learning about the rules of confidentiality, or the code of ethics (NASW, 2008). The advanced beginner can demonstrate marginally good performance, and they can now look at situational components of an experience called “aspects” by Dreyfus and Benner (Benner, 1984; Dreyfus & Dreyfus, 1980). These aspects are “global characteristics that can be identified only through prior experience” (Benner, 1984, p. 22). Learners begin to look at similarities between situations and make inferences, and develop guiding principles which are helpful. Benner (1984) typifies the competent learner as a nurse who has been on the job for two to three years. These learners are able to look at big picture scenarios and prioritize which things are most important and plan so that everything is able to be

accomplished appropriately. The proficient nurse can look at a situation as a whole and see where it currently stands and where things need to be in terms of a clinical outcome. They can understand that a person should be farther along at a certain point than they are, and decide what needs to happen to produce better results. The proficient performer can hone in on aspects that are most salient or important. Finally, the expert nurse has an intuitive grasp of a situation, and is able to zero in on a problem situation without having to sift through all kinds of alternative explanations and actions. The expert has had several years in the same area to develop an ability to think and respond fluidly and evidence flexibility and judgment (Benner, 1984).

The Dreyfus Model of Skill Acquisition (Dreyfus & Dreyfus, 1980) and its application in nursing by Benner (1984) have many potential contributions to understanding the professional journey in social work. This model could provide a conceptual framework to use in understanding how new social work graduates gain skills and practice wisdom as they grow as a social worker. Klein and Bloom (1995) discuss the use of practice wisdom as a mediator between empirical knowledge about methods that work and the unique qualitative aspects of client situations. Klein and Bloom (1995) state “Practitioners may intuit as yet unarticulated commonalities across clients so that such experience-driven practice knowledge pushes beyond what is known in a logical deductive sense” (pp. 801-802). This is similar to what Benner (1984) discussed in terms of expert nurse practitioners being able to intuit what is happening or not happening with a patient and make solid practice decisions based on their wisdom. Having a model to begin to look at professional development would be beneficial for social work, especially one that has had much validation in nursing.

While there are many similarities between the fields of nursing and social work, there are still significant differences in terms of the skill sets required. Not to diminish the importance of the skill set of new social workers, or the critical work that they do, however, mistakes made by social work practitioners do not as commonly have life or death consequences as they do for new nurses (with the exception of child welfare investigators, mental health professionals assessing suicide, and a few others). New nurses also have an incredible amount of scientific clinical protocols that must be followed exactly, something that we would think of as hard science. In social work, there is always a dynamic of having to filter the methods and techniques used through the characteristics of the client, the family, and the environment. It is unknown if these dynamics would impact the application of this model.

Stage models: Schlossberg's model of transition. Schlossberg (2011) posits a model of transition, which arose out of an interest from a human resources perspective in looking at what happens as people move to a different job or location. This model has applicability to social work in looking at how students experience the transition from student to professional and the myriad changes that go along with this transition. Koerin et al. (1990) discussed the applicability of this model when talking about the complexity of the transition from student to social worker for the younger student, and they advocate for faculty becoming more influential and involved with students before graduation in order to ease the transition.

Schlossberg (2011) believes that understanding the type of transition people are experiencing is critical to being able to identify and cope better with the change. She identifies three types of changes: anticipated, unanticipated, and nonevent transitions.

Anticipated changes are things like graduating from college, marrying, becoming a parent, starting a first job, changing careers, or retiring. Unanticipated transitions are disruptive events such as major surgery, a serious illness or accident, unexpected promotion or firing. Nonevent transitions are expected events that fail to occur, such as not getting married, not receiving a promotion or being able to afford to retire (Schlossberg, 2011). Schlossberg (2011) says “It is not the transition per se that is critical, but how much it alters one’s roles, relationships, routines, and assumptions. This explains why even desired transitions are upsetting” (p. 159).

Schlossberg (2011) proposes a model for understanding how people cope with transitions called the 4S System, which stands for situation, self, supports and strategies. Situation refers to the person’s situation at the time of the transition and the current level of stress. The less stress a person is under already will obviously make the transition they are experiencing much easier. The self refers to the person’s inner strength and capacity for dealing with ambiguity. Depending on whether someone is an optimist and the degree of their resilience, they may or may not cope well with a transition. Schlossberg gives the example of a person who is out of work because of the current economic situation. If the person completely blames themselves versus the economy, they are probably more likely to have a difficult time. The third S is for support, which makes a critical difference when transitions occur; support increases resilience. Strategies, the fourth S, refers to coping strategies that people use to change or reframe the situation. Schlossberg (2011) utilizes these strategies for people in employment transitions, but this model is certainly applicable to students as they are transitioning from the academic world into the world of work.

This model acknowledges the complex factors involved in any transition and the unique factors that each person brings which impact how well they will progress through the transition. This model has been applied to several other work-related situations. The model is more theoretical than focused on predicting behavior, but has many implications for understanding why one student's experience of transition to a first job may be much more challenging than another's. Leibowitz, Schlossberg, and Shore (1991) suggest using the model to ask assessment questions of employees, and additionally suggest the importance of a life span approach to examining the impact of transitions. They suggest several questions that may be applicable to preparing students for the transition to work: "Am I usually challenged or overwhelmed by transitions? Am I getting what I need for this transition in terms of affirmation and aid? Am I flexible, choosing from a range of strategies?" (p. 44). This theory has not been empirically tested with social workers. And it may be more useful for assessment purposes and informing a research study than providing any direct suggestions for testable hypotheses. This is also more of a descriptive theory of interaction versus a prescriptive or predictive theory of transition, thus the implications for the model are mostly applied in human resources and are used to help facilitate workshops for new employees or those who are downsized.

Duchscher theory model—The stages of transition and transition shock. A new model that has evolved in nursing is The Stages of Transition from Duchscher (2008) which is a staged theory of the transition that occurs during the first 12 months of the new nursing graduate's work experience. This model was developed after ten years of qualitative research involving new nurses, although much of the qualitative data examples came from a study of 12 graduate nurses (bachelor level). The model espouses

three stages that nurses progress through as they begin their career: Doing, being, and knowing.

The initial stage encompassing the first three to four months for new nurses is the *doing* stage (Duchscher, 2008). This stage is characterized by new nurses being more idealistic rather than realistic. They expressed intense emotions as they worked through the processes of “discovering, learning, performing, concealing, adjusting and accommodating” (p. 444). In this stage, new nurses had a full caseload of patients within weeks of being hired, and none of them were formally mentored. The focus of these new nurses was on doing what was expected, doing it well, and completing tasks on time. These new nurses were driven by a need to belong and went to great lengths to disguise feelings of inadequacy from other colleagues. The new nurses were often put in situations that were beyond their practice knowledge, and they were very hard on themselves when they did not perform adequately despite the challenging situation (Duchscher, 2008).

Within this stage, Duchscher (2009) also has developed *Transition Shock Theory*, which is solely focused on the initial stage of role adaptation for nurses in their first one to four months of employment. This theory focuses on the experience of new nurses as they leave the professional practice, behaviors, and values they learned in school and are confronted with the reality of the world of work. Because this is an important part of her larger model, and it may have applicability to social work, this model will be explored in more detail. Duchscher (2009) explains that this experience of transition shock was significantly disorienting to the new nurses. They felt “ill-prepared for the toll this initial transition would take on both their personal energy and time and on their evolving

professional self-concepts” (Duchscher, 2009, p. 1105). The element of surprise is particularly significant in this model, as the new graduate nurses did not expect to have so many intense feelings, such as loss, doubt, confusion, and disorientation (Duchscher, 2009). This transition shock manifested itself in several aspects of the new nurses’ lives: emotional, physical, sociocultural and developmental, and intellectual. The emotional experience was much like a roller coaster with the new nurses experiencing significant anxiety and fears. Duchscher (2009) reports that their fears were primarily about being exposed as being incompetent, potentially hurting a patient, and not being able to perform their roles and responsibilities as expected. Understanding, anticipating, and managing this transition shock enables new nurses to make a smoother and better transition to the workforce. The literature does not appear to address the experience of new social workers in their first few months on the job, and whether or not their experiences would be similar to those of their nursing colleagues.

The second part of the Stages of Transition model is the *being* stage (Duchscher, 2008). During this six to eight month period of time, nurses felt better able to handle the not-knowing and become better able to seek out support when needed. In this second stage, nurses grew rapidly in knowledge and skill competency. They were somewhat less frustrated than in the first stage, but began to withdraw and separate themselves from their work environment in order to regain some balance. Their experience during this time can be characterized by disengaging, questioning, searching, revealing, recovering, accepting, and ultimately reengaging in their chosen career. The nurses felt constrained by too much surveillance of their jobs, but also felt insecure when they were on their own. Often nurses experienced a crisis of confidence in their own practice at about the

five to seven month time frame which often spurred them on to continue to learn and grow (Duchscher, 2008).

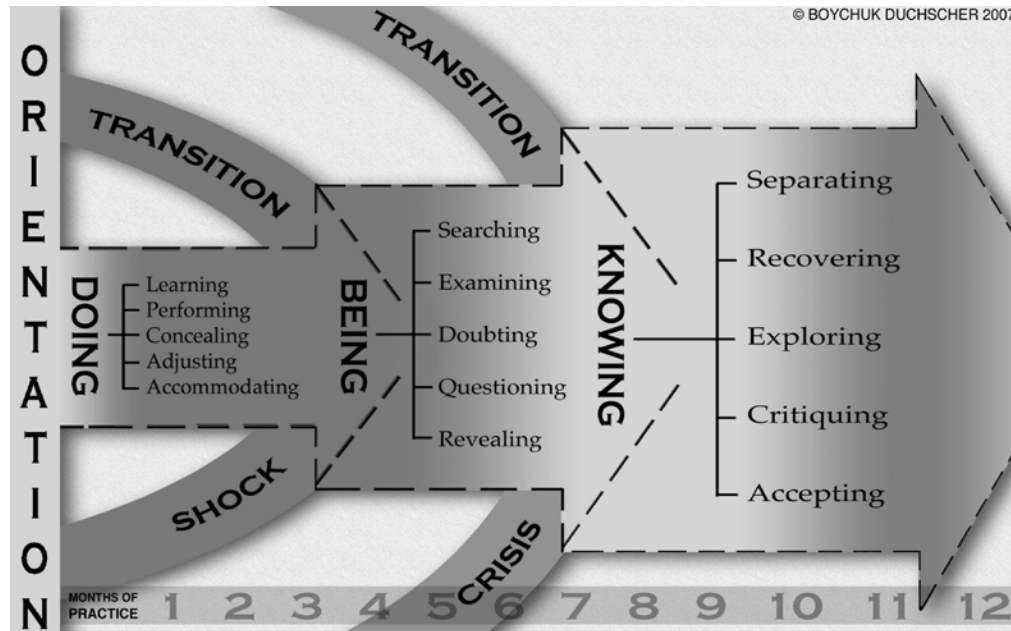
The final stage of the model is about *knowing* and this encompassed the period of time around the one year mark on the job. New nurses felt better able to handle the job responsibilities required of them, but began to express more frustration in dealing with the system. At this point, the new nurses realized that they were no longer beginners and felt some sense of stability in their roles (Duchscher, 2008).

Duchscher's (2008, 2009) models suggest to employers how they can best support new nurses at specific times during their first year. It also suggests to educators that preparation for some of the reality shock that new nurses may face would be helpful so they do not personalize their experience, and understand it in the context of what beginning nurses often go through in order to become more competent. Duchscher has developed a graphical depiction of the model (see Figure 3), and has also written a book for new nurses to prepare them for this transition: *From Surviving to Thriving* (Duchscher, 2012).

The Stages of Transition Theory by Duchscher (2008) is situated and supported by multiple studies in nursing focusing on the experience of new graduates (Candela & Bowles, 2008; Casey et al., 2004; Deppoliti, 2008; Ellerton & Gregor, 2003; Hinds & Harley, 2001; Kelly & Ahern, 2009; Kramer, Brewer, & Maguire, 2011; McKenna & Newton, 2008; Morrow, 2008; Scott et al., 2008; Smith, 2007; Ulrich et al., 2010; Wangenstein et al., 2008). The differences between social work and nursing in terms of their student populations, pedagogical techniques, preceptor processes, job

responsibilities, and organizational culture make applicability something to be carefully examined and explored.

Figure 2: The Stages of Transition Model (Duchscher, 2008, p. 443)



Gaps in the Literature

I am frankly surprised at the lack of scholarly attention to this topic in social work as it would seem to be of critical importance to social work educators, The CSWE, the NASW, the social work profession, and the new graduates themselves. I feel passionate about understanding the experience of new MSWs as they enter the workforce and I want to understand their experience of transition from student to practicing professional. This identified deficit in the social work professional literature is actually not just a gap, but a huge, gaping hole, and there is such a lack of knowledge that my entire career could be consumed with trying to understand this issue.

Much is known about the transition journey of new nurses and teachers as there is considerable literature in this area. Because of the few studies in this area for social work, it is unclear what the transition process is for social workers, either undergraduate or graduate. This study examined some of the issues involved in the transition from student to professional and what processes are commonly experienced by new MSW graduates. The focus of this research project was on the transition journey of new MSW graduates and the development of a process model that reflects that journey. The voices of the participants are used to substantiate the proposed model. The discussion section explores the issues raised by the graduates in more depth and examines the current literature to compare and contrast findings.

Chapter Three: Methodology

The purpose of this study was to understand the journey that new MSW graduates experience as they transition from student to working professional in their first eighteen months after graduation, and to explore what contributes to professional satisfaction and development. The primary goal of this study was to develop a grounded theory that describes how MSW graduates navigate this territory of being new professionals. The research questions were: (a) What is the process of transition from student to employee like for new MSW graduates? (b) What are the factors that influence this transition during the first 18 months for MSW graduates? and (c) Are there critical junctures in the processes of transitioning from being a student through the first 18 months of MSW employment that are related to satisfaction and/or professional growth?

This chapter describes the methodology of this study, including 1) rationale for qualitative methods, 2) rationale for grounded theory, 3) grounded theory methods for sampling, interviewing, data gathering, data analysis, and evaluation, and 4) specific application of these concepts in this study.

Rationale for Qualitative Study of New Social Workers

Since there are no published research studies solely of new MSW graduates, this topic is ripe for exploration via a qualitative study in order to find out about the experiences of new MSW graduates in their first year of professional work. Streubert and Carpenter (2011) recommend using qualitative research methods when there is little if anything published on a topic, and if the topic could use further clarity. The philosophical underpinnings of qualitative research can vary; this study used a constructivist approach to knowledge. Assumptions of the constructivist philosophy

include that humans make their own meanings out of situations and that these meanings evolve from the context of culture and social interaction (Creswell, 2009). Lincoln and Guba (2013) discuss how the nature of reality in a social constructivist paradigm is that reality is subjective and that there are multiple realities. Researchers try to understand the perspective of the person's interpretation of reality through their own experience and background (Mills, Bonner, & Francis, 2006). The researcher intends to become an insider into the participant's world, and uses awareness of their own values and interpretations to explore results. This study used qualitative methods, more specifically, constructivist grounded theory methods.

Grounded Theory Methods

Grounded theory methods (Glaser & Strauss, 1967) were used to build a theoretical framework for the research questions. Grounded theory is based on symbolic interactionism (Mead, 1931/1967). Blumer (1986) presented three premises of symbolic interactionism: 1) human beings act toward things based on the meaning that those things have for them, 2) these meanings arise from social interactions, and, 3) these meanings are modified and interpreted by the person who then acts. The interpretive process provides the basis for grounded theory, which looks at how people interpret and make meaning of their lives (Benoliel, 1996). Charmaz (2014) builds on Blumer's positions and posits three additional premises:

- 1) meanings are interpreted through shared language and communication,
- 2) the mediation of meaning in social interaction is distinguished by a continually emerging processual nature, and 3) the interpretive process becomes explicit when people's meaning and/or actions become problematic or their situations change. (p. 271)

Symbolic interactionism is the theory that underpins grounded theory, although there can certainly be other theories which influence grounded theorists. A basic assumption of grounded theory, rooted in symbolic interactionism, is that human experience is interpreted through a process of social interactions and influenced by the sociocultural environment. The method focuses on: a) the complexities of people undergoing change, b) the influence of social interactions on outcomes, c) critical junctures that affect processes of adaptation, and d) how the social environment influences human experiences (Benoliel, 1996). Symbolic interactionism and grounded theory can be seen as forming a theory-methods package which works well together (Charmaz, 2014).

Grounded theory is the most widely used and popular qualitative research method (Bryant & Charmaz, 2011). Glaser and Strauss (1967) first developed the method as a way to generate theory that was grounded in the experience of participants. They believed that theoretical processes are always at play in interactions, but can be uncovered by an intentional researcher. Their book, *The Discovery of Grounded Theory* (Glaser & Strauss, 1967) was considered ground-breaking at the time as it helped to legitimize qualitative inquiry as a discipline in its own right and not just as a precursor to quantitative work (Charmaz, 2014). Glaser and Strauss went in different directions after the publication of their seminal text with Strauss connecting with Juliet Corbin to publish two books on grounded theory (1990, 2008). Their book, *Basics of Qualitative Research* (Corbin & Strauss, 2008) proposed a similar but somewhat more emergent perspective on grounded theory. Many grounded theorists swear allegiance to either the Glaser version or the Strauss and Corbin version, although there is much overlap between the two (Birks

& Mills, 2011). Grounded theory can be approached from many different epistemological perspectives, including positivist, post-positivist, constructivist, and post-modern (Wu & Beaunae, 2014).

Grounded theory is the preferred qualitative method to use when there is little known about a topic, when the goal is to understand or define a process, and when you seek to generate core categories around which those processes could be organized. Grounded theory can be used to generate explanatory theories about the processes that are found in the data (Birks & Mills, 2011; Wood, 2011).

Constructivist Grounded Theory

Charmaz (2014) is the originator of constructivist grounded theory, and this perspective was used in this dissertation study. She believes that constructivist grounded theory “highlights the flexibility of the method and resists mechanical interpretations of it” and it “shreds notions of a neutral observer and value-free expert” (p. 13). Charmaz (2014) believes that the constructivist paradigm highlights the subjectivity of the process and positions the researcher as a part of the interpretive process. The researcher does not bracket off their own ideas and notions; instead, they understand that their own values shape what they see and what they are drawn toward.

Charmaz (2014) summarizes the method:

...grounded theory methods consist of systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories from the data themselves. Thus researchers construct a theory ‘grounded’ in their data. Grounded theory begins with inductive data, invokes iterative strategies of going back and forth between data and analysis, uses comparative methods, and keeps you interacting and involved with your data and emerging analysis. (p. 1)

Grounded theory has its own unique practices that define it philosophically and methodologically. According to Wiener (2010) there are eight characteristics that are common tenets of grounded theory: 1) data gathering, analysis and theory construction proceed concurrently, 2) coding starts with the first interview and/or field notes, 3) memo writing also begins with the first interview and/or field notes, 4) the constant comparison technique is used to tease out similarities and differences and thereby refine concepts, 5) theoretical sampling is the disciplined search for patterns and variation, 6) theoretical sorting of memos sets up the outline for the writing of a paper or book, 7) theoretical saturation is the judgment that there is no need to collect further data, and 8) identification of a basic social process that accounts for most of the observed behavior that is relevant and problematic for those involved. Charmaz (2014) agrees with Wiener (2010) on the importance of conducting data collection and analysis simultaneously, using constant comparison, memo writing, and theoretical sampling, but emphasizes a few different aspects. Charmaz (2014) adds that in grounded theory, the goal is to:

analyze actions and processes rather than themes and categories, draw on data to develop new conceptual categories, develop analytic categories through induction, emphasize theory construction rather than description, search for variation in the studied categories and pursue developing a category rather than covering a specific empirical topic. (p. 15)

Grounded Theory Methods: Methodological Context and Study-Specific Details

Statement of researcher position and role of reflexivity. Charmaz (2014) believes that constructivist grounded theorists take a “reflexive stance toward the research process and products” (p. 240). The researcher’s constructions “take place under pre-existing social conditions, arise in emergent situations, and are influenced by the researcher’s perspectives, privileges, positions, interactions, and geographic locations” (p. 240). The starting point of the researcher matters greatly, and may change

as the research process progresses. The researcher's values determine what they see in the research, and it is important to know and examine those values and beliefs and be reflexive about how those influence our interpretations. Any theory developed "depends on the researcher's view; it does not and cannot stand outside of it" (Charmaz, 2014, p. 239). Researchers must critically reflect on their own assumptions and biases, as well as those of participants, in order to understand the stories that they are hearing (Birks & Mills, 2011; Charmaz, 2014). Interviews with participants are not just a matter of the interviewer collecting the data. Interviews provide a space in which the co-construction of data is mutual and negotiated (Birks & Mills, 2011).

In this study, I had previous contact with many of the participants and I was explicit about my role in this study as a doctoral student and that I was not doing this as a representative of the school, nor was I their professor anymore and they were free to say whatever they wanted about their education. Many students may have continuing relationships with the school as alumni, and I emphasized that they would be given a pseudonym and that all identifying comments or incidents would be omitted for their confidentiality.

As part of being a qualitative researcher in the constructivist tradition, before I even interviewed anyone, I wrote a memo about my own experience as a new MSW, what I thought I would find in this study, as well as identified any biases and concerns about social work graduate education. Birks and Mills (2011) call this thinking about your "multiple selves" (p.51). This reflection was important in that it helped me be thoughtful about not imposing my own ideas upon the participants and continuing to remain curious about their own idiosyncratic experiences. Having said that, having been

an MSW student more than 25 years ago, and having worked with students at a university in the various roles of field instructor, adjunct faculty, recruiter, advisor and lecturer, I do know that I have a unique understanding of their experience. Charmaz (2014) believes that constructivist grounded theorists interview with mutuality in mind, and understand that the interview promotes a mutuality of understanding and a relationship. “In this sense, the interview becomes more than a performance. Instead, it is the site of exploration, emergent understandings, legitimation of identity, and validation of experience” (p. 91). While I may have had a relationship with some of these participants when they were students, the experience of the interview was unique. From a constructivist perspective, I understood that the stories they told me were co-created between me and each participant in the interview space. Also, as a professor, I tried to demonstrate by being curious that I am not an expert or authority on this experience, and that they are the only ones who can tell their story. Being conscious of the power dynamic inherent in the professor-student relationship, I tried to show that this interview is a different forum by being less formal and interrogative, tried to allow silence for them to compose their thoughts and have their own space. My goal was to hear their voices, listen to what was not said, and enable them to tell their own stories, and not let mine intrude.

Sample. Sampling in grounded theory involves seeking out sources which will yield rich data, data which will provide thick descriptions of participants’ thoughts, feelings, intentions and actions (Charmaz, 2014). Both purposive and snowball sampling study were used in this study. Purposeful sampling involves finding participants that may know about specific experiences and intentionally recruiting them. Snowball sampling,

also called nominated sampling, can be used to find other participants through the introduction of current participants to the researcher (Streubert & Carpenter, 2011). The difficulty with sampling for this study was the significant diversity of the potential participants. Some social workers who receive an MSW have a Bachelor's in Social Work, while others have undergraduate degrees in psychology, sociology, and related social science fields. However, there are also students who have degrees in business, math, chemistry, education, and other fields. Some students have had considerable work experience when they enter an MSW program, and others have had none at all. Nationally, almost three-quarters of full-time MSW students are age 34 or less, with at least one-quarter being under age 25 (CSWE, 2012). Due to the differences in background, education and training, new MSWs are not a homogenous group, and some consideration must be given to this fact when designing studies and interpreting results. I had participants complete a brief profile which details their previous social work or social service experience and the type of work that they have done, including years of experience in the field prior to attending school (See Appendix B). This information enabled me to understand the diversity of experience of participants and gave context to the interviews.

In grounded theory, sample size is not completely identified prior to the study, but is determined by the emerging theoretical framework. Both Morse (2011) and Charmaz (2014) recommend choosing a sample size that is not so small as to engender skepticism about results, and not so large as to make excessive data an impediment to analysis. Usually a sample size of 20-30 is typically adequate to identify one psychosocial process (Creswell, 2009; Noerager Stern, 2011).

In this study, potential participant emails were identified through the alumni database of recent graduates from a Midwestern university and were sent a study recruitment email (Appendix D). IRB approval as an exempt study was received through Indiana University to access this information and proceed with the study. The original IRB set the parameters of employment from nine to 16 months, and it was modified before data collection began to accommodate the participants who graduated in May and were employed for 18 months. The goal was to recruit between 25-30 new graduates for the study, and from the respondents to the invitation to participate, 27 new graduates were interviewed.

Participants. The university's MSW program typically has close to 200 graduates per year. The composition of the 2012 graduating class was 85% female and 15% male, with 82% Caucasian, 12% African Americans, two percent Latino, and one percent Asian with the rest not self-identifying (S. Gass, personal communication, July 15, 2012). I tried particularly to follow up with interested people who would represent diverse voices in the study, including those with considerable prior social work experience, no prior experience, men and minority students in the sample to the extent that they were willing to participate. Fifteen percent of my sample was made up of non-Caucasian participants.

More than thirty graduates responded to the interview invitation which was sent out by email explaining the purpose of the study, time required and compensation (\$10 gift card). One of the participants was recruited by a friend who had been interviewed. Participants were also invited to read the completed dissertation as well so that they could understand the importance of their contribution.

Twenty-seven new graduates met the inclusion criteria of being willing to talk about their insider knowledge of the experience, and having been employed at least nine months in a social work job, but not more than 18 months. Those who agreed to be interviewed were given the informed consent statement and were scheduled for an interview at their convenience. The informed consent form included granting permission to audiotape and transcribe the interview and the completion of a brief demographic form (Appendix C).

In grounded theory, theoretical sampling is used to identify participants who can contribute to emerging themes. Birks and Mills (2011) believe that theoretical sampling begins from the very first interview and is used to follow ideas and enables you to “confirm, clarify, and expand” emerging categories (p. 70). In this study, participants were able to react to emerging ideas and themes that had been preliminarily conceptualized during the data gathering process through earlier interviews.

Twenty-four of the participants had been employed for at least 14 months, and the other three from nine to 13 months. Only one participant was male, and the others all identified as female. Twelve had a BSW prior to getting an MSW. The remaining students came from a variety of fields, such as psychology, sociology, and education, among others. The ages ranged from 24-49 with the average age being 31.5 years old. Most participants were Caucasian except for four participants (one African American, one Asian, one Mexican American and one who designated as “other”). The majority of the participants graduated in May of 2013, with only four participants graduating in August or December of that same year. Interestingly, only ten of the 27 have had just one job since graduation. The other 17 have had more than one position, with four

having three or more. Eleven of the participants do not have an MSW supervisor, but are supervised by someone with another degree. The vast majority of the participants were working in either the health or mental health fields, including addictions and working with veterans. Only four of the 27 were working in child welfare or schools. None of the participants was working in a strictly macro position, although one participant was working on starting her own agency while working in a case management position.

Table 1: Overall Participant Characteristics

| Participant Characteristics | N=27 |
|---|-------------------------------|
| Age | Number of participants |
| 24-29 | 14 |
| 30-34 | 6 |
| 35-39 | 3 |
| 40-44 | 1 |
| 45-49 | 3 |
| Advanced Standing/BSW | 12 |
| Non-BSW | 15 |
| Years of Social Work or social service experience prior to MSW | |
| 0 | 11 |
| 1-4 | 7 |
| 5-9 | 6 |
| 10-14 | 3 |
| 15 or more | 0 |

Interview process. Interviews were scheduled at a time and place convenient to the participant, and most often took place in a coffee shop or at the university, which was centrally located for many of them. Interviews lasted from 45 to 90 minutes, with most lasting about an hour. The majority of the participants were known to me, either by name or through having taken a class from me, but there were several others that I had never met before. All participants were graduates of the same university system, but from multiple campus sites. As much as possible, I drove to meet them in their own town, but in the case of two out-of-state participants, I conducted the interviews via phone. A

Skype interview was facilitated with two participants who lived in the same state, but were more than three hours away and preferred a phone interview.

Interviews were semi-structured, and a list of questions to potentially draw from was used, but I did not stick exclusively to this list and followed the participant's line of discussion as well as soliciting information about emerging themes. My invitation to the participants was to have them tell their story of their journey from the beginning-- from how they got their first job, what orientation was like, and discussing experiences on that job that were satisfying, dissatisfying, surprising, scary or challenging, as well as how they felt overall about their journey. These interviews were time sensitive, and no one was interviewed outside the time frame identified of 18 months of employment. Many of the topics arose spontaneously but I often asked them some of the following questions as well:

- How did you get your first job?
- Tell me about how/if your MSW academic career prepared you for practice.
- What has been your experience with supervision?
- What has surprised you about your transition from student to employee?
- When you were still new at your job, what did you do when you found yourself in a situation and you didn't know what to do? What do you do now?
- How is the person you are now different from the one at the beginning of the job?
- What surprises or challenges have you encountered since you began your job?
- How does your job impact your life outside of work now?
- What are you most satisfied with about your job then and now? What are you the most dissatisfied about--in the beginning and now?

- What did you do for self-care?

Data gathering. One of the most unique features of grounded theory data analysis is that sources of data are analyzed as you go, instead of waiting until after all of the data has been gathered (Charmaz, 2014). Glaser and Strauss (1967) say that data collection, coding, and analysis of data should be done simultaneously as much as possible. “They should blur and intertwine continually, from the beginning of an investigation to its end” (Glaser & Strauss, 1967, p. 43). Glaser and Strauss view this as a critical component of grounded theory which enables the researcher to be open to emerging themes and not prematurely come up with an analysis.

Data gathering and analysis. Interviews were audio recorded, transcribed by the researcher and a professional transcriptionist (see confidentiality agreement in Appendix E) and de-identified for analysis. All information was password protected on Google Drive. Original audio recordings have been erased from the audio device and the recordings are stored on the researcher’s computer in password protected files. The transcriptionist has deleted all files from her computer. In grounded theory, coding of the data begins with the very first piece of data, whether it is an interview transcript or a memo or field note. The researcher is both a generator of and a collector of data (Birks & Mills, 2011). Charmaz (2014) promotes several layers of coding: initial (or line by line), focused coding, or second level coding, as well as theoretical coding. Initial coding can take many forms, such as line-by-line or incident coding. Charmaz recommends using gerunds as a grammatical technique to convey action as it aids in capturing process and not just a static experience. She then uses focused coding on the same data that she coded with first level coding as way of beginning to pay attention to codes that have more

significance and are more conceptual than the line-by-line codes. Theoretical coding is moving up one level from focused coding and enhances the focus on theory. Theoretical codes are meant to integrate information, make connections, and highlight process (Charmaz, 2014).

Constant comparison. In grounded theory, constant comparison is the hallmark method of data analysis that leads to the generation of theory. In this iterative process, data is compared with data at multiple levels. Initial codes are compared to later codes, and incidents are compared to other incidents both within and across interviews. Initial codes are compared with later focused codes and categories (Birks & Mills, 2011). Birks and Mills (2011) feel that “ultimately it is this iterative analytical method of constantly comparing and collecting or generating data that results in high-level conceptually abstract categories rich with meaning...” (p. 94). Charmaz (2014) also recommends making comparisons between data early in the study and later and testing your preliminary ideas by comparing data in order to begin to test out categories and beginning theories.

Process of data analysis. Data was analyzed using Charmaz’s (2006, 2014) constructivist grounded theory framework which focuses on “how—and sometimes why—participants construct meanings and actions in specific situations” (p. 130). Charmaz (2006) advocates beginning with initial coding of transcripts and doing line-by-line coding or incident-by-incident coding using gerunds in order to emphasize the dynamic nature of the process you are exploring. After completing the first level of initial coding, focused coding is used to identify tentative categories and themes. Constant comparison techniques involve simultaneously collecting and analyzing data, writing memos and

forming tentative categories with the goal of data reduction and the generation of theoretical categories. Through the technique of constant comparison, categories emerge and relationships between categories are developed and refined with the goal of illuminating a core category or process that explains the phenomenon of study, in this case, the journey of new MSW graduates. Theoretical sampling in grounded theory occurs later in the data analysis process to target participants who can speak to emerging themes (Morse, 2011). In this study, I asked later participants to react to emerging concepts that I had been developing. Also, for purposes of theoretical sampling, participants were emailed one year later in order to explore the concept of reality shock.

The goal of data analysis in this grounded theory study was to identify shared common processes across participants that can offer a model of the journey of new MSW graduates in their first year of employment. In this study, I initially started by performing line-by-line coding on the first three transcripts in the sample, and then began doing more focused coding on the same transcripts along with line-by-line on some others. I returned to line-by-line coding for more transcripts until I had coded half of them in that manner. I coded all the transcripts using focused coding, and went back to the beginning transcripts to re-code what I found in the later transcripts. I used the qualitative software program MAXQDA (Verbi GmbH, 2015) for my focused coding work and putting together my conceptual categories.

Memo writing. Writing memos is the way that the researcher collects ideas. Researchers often write memos of impressions about an interview that they conducted (Sbaraini, Carter, Evans, & Blinkhorn, 2011). Memos are an important way to encourage reflexivity as they help the researcher reflect on their own positionality and biases (Bex

Lempert, 2011). Memos can also be written about random ideas, concepts, comparisons, and connections. “Memo writing creates an interactive space for conversing with yourself about your data, codes, ideas, and hunches” (Charmaz, 2014, p. 162). Saldaña (2013) uses analytic memo writing as the primary way of reflecting and synthesizing the collected material. Ideas that can be captured in a memo include all of the following: your personal relationship to the study and/or the participants; reflecting on the research questions of the study; your reflections about your code choices and their operational definitions; emergent patterns in the data in terms of categories, themes, or concepts; connections you are beginning to make between concepts; emerging theory; problems or issues; reflecting on other memos, and finally ethical issues (Saldaña, 2013)

In this study, I wrote memos from the very beginning of the study and after most of the participant interviews, reflecting on what they said. I also wrote memos after meeting with two other doctoral students who were a part of my IRB-approved team, who also helped analyze several transcripts. Memos were also used to conceptualize potential categories and ideas about the data, as well as capture particularly important participant quotes.

Theoretical sampling. Perhaps one of the most unique features of grounded theory is its use of theoretical sampling. Glaser and Strauss (2015) define theoretical sampling as “the process of data collection for generating theory whereby the analyst jointly collects, codes, and analyzes his data and decides what data to collect next and where to find them” (p. 45). Theoretical sampling seeks additional data that can elaborate and refine the emerging categories already identified from the data. Theoretical sampling can be used to identify gaps in your information, to seek out more information

about a particular category, or to seek out new participants who could further clarify an emerging category (Birks & Mills, 2011). Theoretical sampling was used in my study to ask participants about emerging ideas and give them some of the preliminary findings of my study to see if they felt they were valid or had more information to add to or differentiate from what I was discovering. While I did not re-interview any of the participants, I did email them all more than a year later while preparing this dissertation and asked specifically about the reality shock phenomenon to see if they felt it was significant. I received three responses that further expanded on the answers they had given me during the actual interview about reality shock.

Theoretical saturation. Charmaz (2014) believes you have reached saturation when you have “defined, checked, and explained relationships between categories and the range of variation within and between your categories” (p. 213). In this study, I felt that I had sufficient information about a common process after interviewing the 27 participants, and while there is always room for more data as I truly believe that things are never completely saturated, enough data emerged to be able to put together a conceptual model of the central process.

Identifying a basic social process. Charmaz believes that a social process can be a core category, which is a helpful clarification (Birks & Mills, 2011). Charmaz (2014) does not emphasize the need for a core category or one overriding social process, as she believes that those involve establishing more causal relationships. She advocates for a more interpretive understanding of the data. There could potentially be other core categories or processes in the analysis, but they just may not have been identified because of the positionality of the researcher. Birks and Mills (2011) advocate using a storyline,

as referenced in some of the earlier work of Corbin and Strauss (1990), in order to show the coherence and continuity of the phenomenon under study. This storyline is a narrative which explains the theory and “assists in the production of the final theory and provides a means by which the theory can be conveyed to the reader” (Birks & Mills, 2011, p. 118). Storyline can be used to identify this basic social process as it shows movement or a trajectory. Charmaz (2014) does say that looking for process is more active than just looking for a core category, and she advocates focusing on the relationships between categories and understanding what is happening in those interactions as central to grounded theory.

In this study, a common process was discovered that showed the transition through multiple stages for new graduates. This process was the learning curve that new graduates experienced, which I titled *Riding the Waves*, which is a water metaphor. I found numerous references to “being thrown in the deep end” and “drowning” in nursing studies. One of the participants in this study, Lucy, spoke of how her supervisor described being a new social worker as a process like learning to swim. This model tells the story of how new MSW graduates transition from student to professional.

Evaluating Grounded Theory–Establishing Quality

The evaluation of grounded theory is critical in order to affirm its authenticity to the method and to the establishment of quality in the research process and products. There are many ways of establishing the credibility of grounded theory. Creswell (2014) looks for several criteria when evaluating grounded theory research:

- 1) the study of a process or interaction as the key element, 2) a coding process that works from the data up to the larger theoretical model, 3) the presentation of a theoretical model in a figure or diagram, 4) a

story line or proposition that connects categories and that present further questions to be answered, and 5) a statement by the researcher indicating their stance in the study evidencing reflexivity. (p. 217)

Charmaz (2014) uses four primary criteria for evaluation of a study: credibility, originality, resonance, and usefulness. She poses questions for each aspect of quality in order to engage the researcher's critical thinking, and those are highlighted for consideration along with how this study responds to those questions:

Credibility. Has your research achieved intimate familiarity with the setting or topic? Are the data sufficient to meet your claims? Have you made systematic comparisons between observations and between categories? Are there strong logical links between the gathered data and your argument and analysis? Has your research provided enough evidence for your claims to allow the reader to form an independent assessment—and to agree with your claims (Charmaz, 2014)?

In this study, credibility was enhanced in several ways. Participant quotes were used to support all theoretical claims. In addition, I compared two of the written transcripts with the original audio recording for accuracy. At multiple stages of the research process, I consulted with the dissertation chair (Dr. Kathy Lay) and with the faculty member at the researcher's university who is an expert in grounded theory methods (Dr. Claire Draucker). I checked out emerging theories with participants during the data collection process. A research team comprised of two social work colleagues (fellow doctoral students) met with me five times and assisted in reviewing de-identified data, memos, and emerging themes in order to ensure that I was capturing the voices and spirit of the participants. This research team completed the IRB/CITI training for research protocols. I maintained an audit trail of transcripts, memos, processes and diagrams, and they are in password-protected computer files. I supported my process

model with many participant quotes and examples to show that the themes arose from the data.

Originality. Are your categories fresh? Do they offer new insights? Does your analysis provide a new conceptual rendering of the data? How does your grounded theory challenge, extend, or refine current ideas, concepts, and practices (Charmaz, 2014)?

Since there have been no studies which have exclusively examined the first-year experience of new MSW graduates, this research significantly adds to the knowledge in this area. Originality will also be shown through building a literature review that reflects the current scholarly work in this area, gaps in the knowledge base, and how this study will contribute to building the groundwork for more research on this topic.

Resonance. Do the categories portray the fullness of the studied experience? Have you drawn links between larger collectivities or institutions and individual lives, when the data so indicate? Does your grounded theory make sense to your participants or people who share their circumstances? Does your analysis offer them deeper insights about their lives and worlds (Charmaz, 2014)?

Resonance is the ability of a study to give voice to the fullness of the experience of the participants and offer an analysis which brings greater depth or insight to the participants or those also experiencing a similar phenomenon (Charmaz, 2006). During data collection, participants were asked to react to emerging categories and proposed relationships between categories to see if they accurately reflect their perceptions. Social work colleagues (two doctoral students) were also invited to reflect on the emerging

concepts to see if they resonate with their reading of the transcripts and with their own past experiences.

Usefulness. Does your analysis offer interpretations that people can use in their everyday worlds? Do your analytic categories suggest any generic processes? Can the analysis spark further research in other substantive areas? How does your work contribute to knowledge? How does it contribute to making a better world (Charmaz, 2014, pp. 337-338)?

Usefulness is the ability of a study to provide practical interpretations that can be used to make a difference for people in their everyday lives, and to look at the implications of those interpretations for further knowledge-building and research (Charmaz, 2006). In this study, the relevance of these findings is timely as there are continually new MSW graduates joining the world of work throughout the year. This study may help graduating students have a better idea of what to expect in their first job, and may help educators to better understand this transition period so that students can receive enhanced support and preparation. Employers of MSWs may also benefit from understanding this transition period and may use this knowledge to implement new employee satisfaction or retention strategies.

These questions guide the reflexivity of the researcher and encourage the researcher to scrutinize their own work and ensure that the product is thoughtful and thorough. Ultimately, qualitative research and grounded theory must resonate with the research question asked and make sense to those within and outside of the phenomenon under study.

What Constitutes Theory in Grounded Theory?

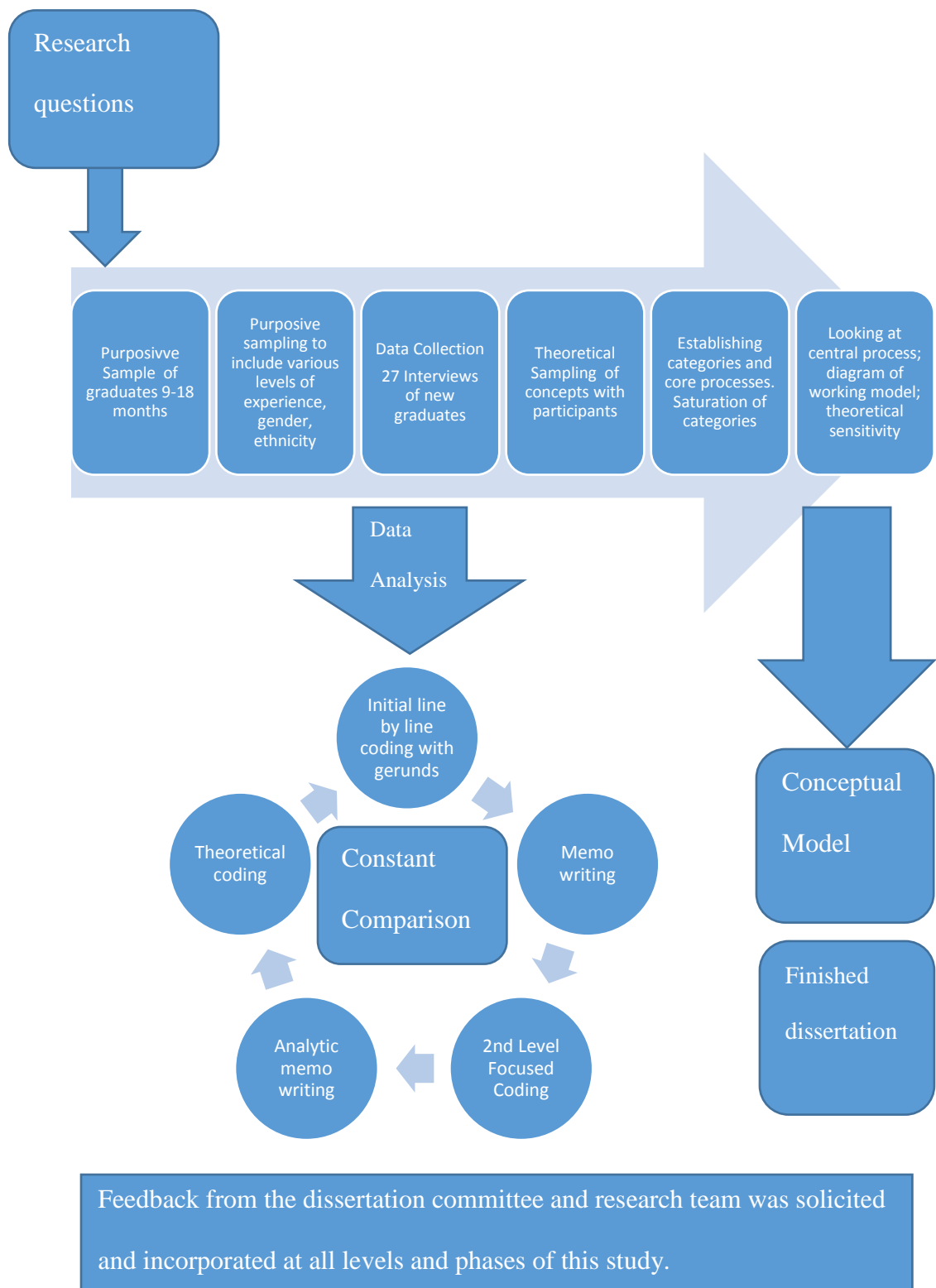
Charmaz (2014) also adds an additional criterion for studies which exemplify grounded theory. She argues for a definition of theory which is about abstract understanding versus establishing causality. Birks and Mills (2011) believe that the final product of grounded theory is “integrated and comprehensive grounded theory that explains a process or scheme associated with a phenomenon” (p. 12). Noerager Stern (2011) says that true grounded theory should give readers an immediate recognition that this theory is reflective of the social situation under investigation, and that the developed theory is derived from the data and not forced to fit the preconceived ideas of the researcher. Charmaz (2014) mentions five crucial points about theory in grounded theory:

1) Theorizing is an ongoing activity; 2) grounded theory methods provide constructive ways to proceed with this activity; 3) the method involves abduction as well as induction; 4) the research problem and the researcher’s unfolding interests can shape the content of theorizing, rather than the method presupposing the content; and 5) the products of theorizing reflect how researchers acted on these points. (p. 244)

Final Product

The goal of this grounded theory study is to produce a substantive theory about the relationship between identified categories which arose from the data generated from interviewing the study participants. In this study, a grounded theory of the process of transition for new MSW graduates was conceptualized from the data in order to understand what this transition involves. In order to be thoughtful about the process of conducting this study, I have made a diagram of the process that I used to do this research study (Figure 3). This diagram shows how the data analysis process proceeds in terms of the multiple iterations of comparing data with data and with reflective memos. The conceptual model that emerges is built from multiple discussions with the data.

Figure 3: Diagram of the Research Process for this Dissertation



Chapter Four: Findings

Research Questions

There were three primary research questions to be explored for this research project: (1) What is the process of transition from student to employee like for new MSW graduates? (2) What are the factors that influence this transition during the first 18 months for MSW graduates? and (3) Are there critical junctures in the processes of transitioning from being a student through the first 18 months of MSW employment that are related to satisfaction and/or professional growth? Each question is explored in depth and a process model is presented that is a reflection of and is supported by the participants' voices and experiences.

Grounded Theory as Exploring Process

In this study, grounded theory principles and methods were used to generate a process model of the common experience of transition for new graduates. Process models help to “conceptualize relationships between experiences and events” (Charmaz, 2014, p. 245). This process model integrates common themes experienced by the participants, and gives shape and meaning to the solicited stories. In answer to the first research question about the process of transition, this model shows the common stages that new graduates experience, and how those stages relate to each other. This study is about how new graduates find their way in the world of work as they struggle to integrate their prior experiences and preparation with the workplace norms and culture. This integration occurs over time and is dynamic, constantly changing and challenging the new MSWs to continually re-evaluate themselves and what they think they know. My grounded theory conceptual model for the stages of transition that these new graduates

went through is called *Riding the Waves*. Although the model is presented as a series of stages, it is a conceptual rendering of the process of transition for new MSW graduates. These stages are not necessarily discrete, prescriptive or rigidly chronological, but each of these stages occurred for the majority of the participants and is an amalgam of their experience. This model tells the story of the journey of new MSW graduates as they begin their careers. Birks and Mills (2011) advocate for showing this process model through the use of a storyline, or a narrative re-telling of the common experience. Storyline is a way to showcase the developing theory as well as to bring to life the conceptualization of the connectedness of the various themes and ideas. This model uses the metaphor of swimming as it expresses a learning curve that requires a leap of faith, and some perseverance to withstand the difficulty. There is also an element of danger involved—if you do not learn to swim, you could drown. Ultimately, getting to the point where you can ride the waves results in the ability to be adaptable and figure out how to survive. The model consists of five stages: Testing the Waters, Jumping In, Sinking or Swimming, Treading Water, and Riding the Waves. In answer to the second research question about the factors affecting the transition, the factors that are associated with each stage will illustrate the specific issues by highlighting the participants' comments about those factors. The third research question about critical junctures will be addressed by discussing the unique challenges and issues that the new graduates face at each of these stages, and places along the path where things can go well or fall apart. In the rest of this chapter, each stage and its component themes are discussed, along with a crucial question that new graduates face at each part of the process.

Presentation of Findings

For purposes of this study, the specific number of graduates experiencing certain issues will not be used, but the following qualifying words will help to give readers a sense of the degree of commonality of an experience to better paint a picture of the journey (Bloomberg & Volpe, 2012). In general:

- Vast majority = More than 75%
- Majority = 50 to 74%
- Many = 25 to 50%
- Several = 10 to 25%

Participants

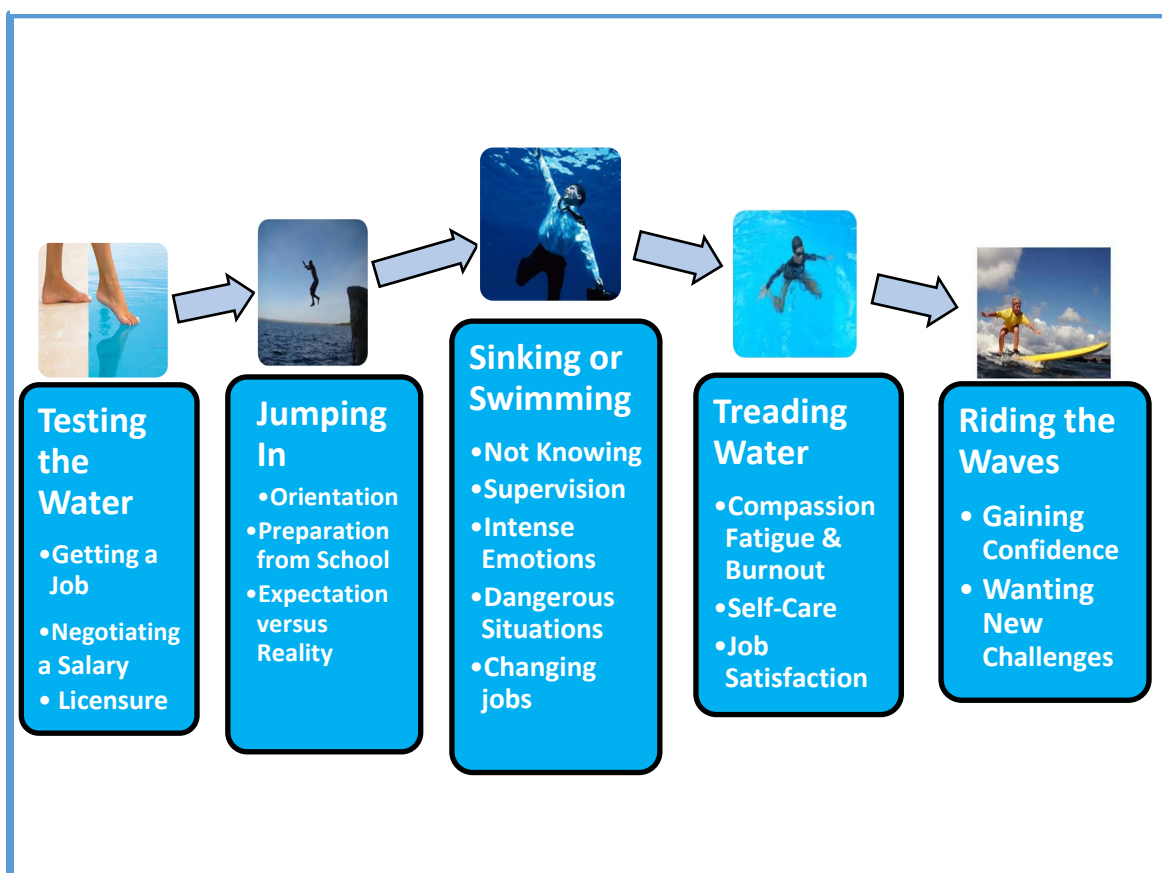
An earlier table showed some global characteristics of this sample. Table 2 shows the individual participant's pseudonyms, ages, and social work degrees. It also shows the number of jobs that each participant in their first 18 months of employment. I will refer to the ages of the participants for the first part of the findings discussion, and after that, readers may refer to the table for more information about the participants.

Table 2: Individual Participant Characteristics

| | Pseudonym | Age | BSW? | Length of employment (months) | Number of jobs since graduation | MSW supervisor? |
|----|------------------|------------|-------------|--------------------------------------|--|------------------------|
| 1 | Wendy | 29 | Y | 14 | 2 | Y |
| 2 | Cara | 26 | N | 15 | 2 | Y |
| 3 | Saundra | 35 | Y | 16 | 2 | Y |
| 4 | Felicia | 25 | N | 16 | 1 | N |
| 5 | Wendall | 25 | Y | 16 | 1 | N |
| 6 | Myra | 28 | N | 16 | 2 | Y |
| 7 | Candice | 33 | Y | 16 | 2 | Y |
| 8 | Greta | 26 | Y | 16 | 3 | Y |
| 9 | Willow | 37 | N | 9 | 2 | N |
| 10 | Darcy | 24 | Y | 16 | 1 | Y |
| 11 | Kellie | 46 | N | 14 | 1 | N |

| | Pseudonym | Age | BSW? | Length of employment (months) | Number of jobs since graduation | MSW supervisor? |
|----|------------------|------------|-------------|--|--|----------------------------|
| 12 | Marli | 45 | N | 15 | 2 | N |
| 13 | Lucy | 28 | N | 16 | 1 | Y |
| 14 | Carla | 29 | N | 16 | 2 | N |
| 15 | Hannah | 25 | Y | 16 | 2 | Y |
| 16 | Charlotte | 32 | N | 17 | 1 | Y |
| 17 | Heidi | 27 | N | 15 | 1 | N |
| 18 | Helene | 27 | Y | 15 | 4 | Y |
| 19 | Rachel | 30 | Y | 11 | 1 | N |
| 20 | Paula | 41 | Y | 18 | 1 | N |
| 21 | Olivia | 34 | N | 18 | 3 | N |
| 22 | Sarah | 30 | N | 12 | 2 | Y |
| 23 | Laura | 28 | Y | 16 | 1 | Y |
| 24 | Gina | 26 | Y | 16 | 3 | Y |
| 25 | Brenda | 39 | N | 18 | 2 | N |
| 26 | Gloria | 30 | N | 18 | 2 | Y |
| 27 | Glenna | 49 | N | 15 | 2 | Y |

Figure 4: *Riding the Waves: Conceptual Model of the Stages of Transition for New MSW Graduates*



The model presented for this study, *Riding the Waves*, uses a swimming metaphor to tell the story about the process of being a new graduate. This metaphor allows for a discussion of the stages involved with becoming a professional social worker. The model is shown in the following diagram (Figure 4).

Testing the Waters

The first stage that new graduates encounter in this conceptual model is *Testing the Waters*. Testing the waters is a common phrase used to describe how we go about approaching something new and deciding if something is right for us or not. The visual

depicts dipping your toe in the water to see if it is the right temperature for you, and if you could visualize actually jumping in. This is essentially what the new graduates are doing at this stage. They are trying to see if they can find a job that is right for them and if it would be a good fit. The most salient issue in this stage is about securing a job, and the crucial question for the new graduate in this stage is “Am I going to be a legitimate MSW?” This stage takes place at the beginning of the journey from when the participants were still students to the time when they land their first job. This may be their first exposure to the social work job market, and they may not have had experience negotiating a salary before. Many of them feel the pressure to find a job quickly, even before they graduate in order to manage finances and student loans. Factors influencing this stage are the process of finding a job, negotiating salary, the need for income, and the impact of licensure on the job search process.

Getting a job. The pressure to find a job can stem from both internal and external forces. Many graduates are pressured to get a job due to financial obligations and student loan repayment. Others feel that they need a job quickly because they want to be a legitimate social worker and prove that they are hire-worthy. Because of the external and internal pressure to find a job, several graduates described taking the first social work job that came along, even if it did not mesh well with their background, coursework or practicum training. This action of taking any job to just simply be employed could be thought of as a “panic job.” Most of the graduates who took a panic job often had left that job and found another one by the time they were interviewed for this study. As Myra, a 28-year-old, said, “Honestly, I just took the first job I got offered.” Several participants described their feelings about having to have a job before they graduated, not

necessarily the job of their dreams. Gloria, age 30, is someone who needed a job because of her financial obligations.

Gloria: Yeah you start freaking out because you are like, I really need a job, you have to pay bills, so many of us who went through the MSW program were not living at home anymore, we're paying rent, we're paying our own bills, so you kind of have get that job.... Yea, that's how I felt. I need a job before I graduate...this is how it needs to be (laughing).

Marli, a 45-year-old and a previous stay-at-home Mom, did not need to work because of financial issues, but wanted to get a job in school social work and those are hard to come by. She felt that she had worked hard for the degree and wanted to be employed as a social worker. "Nothing [I wanted] was available and I was like oh I'm gonna take it ...until something opened up with the schools." Both Gina (age 26) and Wendy (age 29) describe the phenomenon of graduates taking any job they can get or whatever was first offered.

Gina: I know a lot of new graduates are just desperate to get a job and that's how I was and a lot of my friends were, and so, I know in my case, I just accepted this job because I knew the agency, I had heard a lot about them and I was like, I like adolescents but I didn't really do a lot of research or—And also I felt like I was pressured a lot by (agency) to go into that job and not knowing that you can say "no." It's ok—just because they're an employer, it doesn't mean they get to decide what you do. You get to decide that and I think I kinda succumbed to the pressure.

Wendy: The other thing, and this is something I am very passionate about, one of the things that really surprised me was how many of my colleagues, like my cohort, that when we finished up school, they just kind of like were willing to take whatever because they were just likeafraid of not getting a job and some of them took jobs that I was like, the fact that that is what they are offering to pay you is insulting.

Not everyone found a job right away. A few graduates took non-social work jobs until they could find a job, one driving a truck and the other doing some in-home care for an older adult. However, the vast majority of graduates in this study were employed

before graduation, and found a job even if it was not something they particularly wanted. Multiple pressures impacted their timing in securing a position, and it seemed that just getting a position was more important than the type or perceived quality of the job. Getting hired was the goal, and many new graduates knew that the job they accepted was not one that they would hold for any significant length of time, but it served as a placeholder or starter until they could further assess what they wanted to do.

Licensure. Licensure in various states may play a significant role in what jobs new graduates take as they may not be able to immediately work in a setting that requires a license. Often graduates have to wait until their transcript becomes available after graduation, fill out paperwork and get approved to take the licensure exam and schedule the test at a testing center. This process can take several weeks, and many graduates want to have something lined up before graduation. This results in some graduates taking whatever job they can find that does not require a license up front, no matter their background or lack of preparation for the position. Darcy, a 27-year-old who went right from BSW to MSW programs with no time in between says:

Darcy: I had a really tough time getting a job with the hospital because they didn't want to interview me because I wasn't licensed and I couldn't get licensed right away because you have to wait on your transcripts, and I had to get a job within a month" [for financial reasons].

Sarah, a 30-year-old, echoes how licensure impacted her choice of position, and she felt like she had to work at a less than desirable job because of her lack of licensure. She implies that not having a license means that agencies know that they have you at a disadvantage and that you will put up with difficult working conditions because you do not have many options.

Sarah (30-year-old): [I'm] just saying that it was really hard because so many people don't want to hire you with just an MSW. They want an LSW, they want a clinical license, they want more experience and so you kind of have to just take where you can get right off the bat, which isn't always good. And then you get treated like I did at the community mental health agency. And that's a really hard spot to be in.

Salary. Salary is a significant source of uncertainty for new graduates. The amount offered plays a role in deciding whether to accept that first job. Several graduates mentioned that they did not know how to negotiate a salary or what to even expect as a usual and customary salary for new MSWs. Salary can be an issue all along the journey, but particularly when getting that first job it is an area in which they have little or no experience. Graduates can use national salary data for assistance in finding out what social workers make through the Bureau of Labor Statistics or NASW, but they are often on their own to determine what is an acceptable salary for a particular job in a specific market, and that information is often very difficult to obtain. If their peers share with them what they are making that can be helpful, but only a few mentioned collaborating in that way. Gloria, a 30-year-old, wished that she had gotten some specific training in how to negotiate a salary as she felt unprepared. She said, "Social workers don't really get trained about how to ask for more money, like how to ask for a good salary. We don't even know what we should be getting paid, unless you do some research."

In talking with participants, there seemed to be a line of satisfaction for salary in this locale. If they made over \$40,000, most of them were fairly satisfied. Those who made under that amount were somewhat disgruntled. This amount would be different for other geographic locations and of course varies greatly by agency setting. Here in the Midwest, federal employees make a much higher amount. The majority of new MSW

graduates were generous in sharing the salary they were making as a part of this study.

Several graduates reacted to getting less than they expected. Felicia, a 25-year-old, says:

Obviously I wasn't expecting to make a lot of money at all, but to think that I'm making \$1,000 more or \$2,000 than I did without [an MSW] –and now I have \$30,000 in student loans—I feel like that's depressing. I wasn't expecting to ever make a ton of money, but....

Wendy, a 29-year-old, in recounting one of her peer's experience who was offered a ridiculously low salary for working in a school said that while a social worker's primary motivation isn't money, ".... we have families to support, we still have lives to live..." Sarah, age 30, expected that she would be underpaid and said that a lot of agencies will "treat you like slaves almost." Charlotte is a 32-year-old who worked while in her MSW program and was an agency administrator for a small non-profit organization. She got her MSW in order to learn to provide more clinical work with clients.

Charlotte: I took a \$6,000 or \$7,000 pay cut from (agency while in school) to go to (current agency) and so they gave me the salary and then I said, 'Is it negotiable?' and they said no and then I cried. Literally. And they say they're competitive with other community mental health agencies? I don't think they are.

Although not the norm, some new graduates were happy with the money that they got right out of school, and it was not a disappointment to them. Wendall, a 25-year-old with a BSW, felt that he was offered a good amount, but as he talked he realized that what they expected of him for the money was pretty intense and he was not going to receive any health insurance.

Wendall: Salary was actually very, very good. It was satisfying. The backtrack to that is that there are no benefits, so ... I was fortunate enough that I was on my parent's insurance and then my wife just really started, so we switched over to her benefits.... .but I think from what I've heard, a lot of people think, well I make less than you do but I have benefits, so it sort

of weighs itself out. They sort of say well we tend to pay higher based on the fact that we don't have benefits. So salary was never, I was actually pretty happy about it. Now realistically thinking --being on call all the time and I am working 50 hours, so that's really not true salary...

Kellie was unusual in that she fiercely negotiated the salary for her first job. She is a 46-year-old with considerable community-based social service experience, and worked on showing her employer how hiring a social worker over a guidance counselor would be an advantage to the school system. She comes across with confidence when she speaks. She feels that she cannot share her salary with her social work peers as that might make them feel badly about what they are making.

Kellie: [tells me she makes close to \$50,000]. I'm very, very lucky ... And I have earned it! I don't make amends at all other than I know that many of my peers are not appreciated to the same level. I don't talk about it at all. Ever! Yeah, I don't bring that up at all.

Paula, a 41-year-old, is in the position where she has a spouse that makes a good salary. There were a couple of people in that situation and they had the luxury of being more interested in the challenge or type of job than in the actual dollar amount for their first position.

Paula: I don't do it for the money. And again, I get it, some people have to and that's cool. It just isn't the position that I'm in and so it's not a huge factor for me. We had one gal leave who'd been there for nine years and she left primarily because she wanted a higher paying position and found one and I'm glad, I'm like, super, that's cool for her, but for me it's not a motivating factor. The learning is what drives me.

In summary, all of these factors—finding a job, negotiating a salary, and licensure—all impact the timing of getting a job, the type of job available to them, and their perception of whether or not they have a good job. Only a few participants mentioned that they were strategic in sizing up a supervisor or work culture for this first position.

Most were just happy to be employed and be getting paid. Their discontent with their first position began to surface in the next two phases of this model.

Jumping In

The second stage that new MSW graduates experience is *Jumping In*. This title was selected because jumping in implies immersing yourself suddenly in the experience, without exactly knowing what will happen. When new graduates began their jobs, there were many unknowns and the only way to find them out is to jump in and figure it out as you go. The crucial question for them at this stage is, “How do I figure out what I am supposed to do in this job?” After they have secured a position and navigated all of the logistics that go with it, such as salary, benefits, hours, and supervision, they start working. During this time, new graduates get oriented to the agency. They begin to size up the agency and see how things work. They are confronted with whether their concept of what they expected of an actual post-MSW social work job is actually the reality. And, they begin to see whether or not school prepared them to deal with the real-life situations that they begin to encounter on the job.

Orientation. Every job has some kind of orientation, but the experiences for the participants varied widely from a few hours to several weeks. Some had good experiences, but most were quickly expected to take on a caseload. It is noteworthy that new graduates do not get any special recognition of being new to the profession and often get the same orientation as if they were already somewhat seasoned and coming from another MSW level position. Because of that, they have to blend in quickly with the others being oriented as well as the current employees. Greta, a 26-year-old with a BSW, joined a very small private practice right out of school with someone that she did a

practicum experience with, and received no formal orientation and was just expected to jump in and start seeing complex clients right away.

Greta: ... essentially she and I just shared an office space and we talked a couple of times a day, but she was so busy and swamped doing her own thing, meeting with maybe seven people a day, making boatloads of money, ...she was really busy and as a new grad, I realized I was so embarrassed to ask questions that I thought would make me seem like I didn't know what I was doing and I'm really confident, so that was surprising for me, even, to think, 'well, geez, I have a lot of really simple practical questions, something that might be answered in a sit-down orientation kind-of presentation at maybe a more established agency,' but—instead, it was kinda like, ok here's your days, here are some clients I've already got ready, they're ready to meet with you for the first time, they're some of mine, I'm passing them on to you kind of thing and just go for it. That was just wild.

Others also had an experience where they had to hit the ground running. Wendall says that he got “no orientation really, soit was like 4 hours.” Myra, age 28, relates that she got one week of learning the paperwork, one week of shadowing, and then got a caseload of 30 because her supervisor was swamped with her own cases. Candace, age 33, also got “zero training” as the agency gave her paperwork to read, a tour, and then left her to figure out how to carve out her own orientation. Charlotte, age 32, had considerable experience both before the MSW program and during the program, so she was surprised at the lack of training that she received in her job, although she felt that she could handle it because of her experience and maturity, she wonders if others would be able to get what they needed to work with very difficult and complex clients.

Charlotte: The onboarding at (current agency) is fair. Their orientation process is about two weeks long and it involves a lot of speakers and a lot of trainings, cultural competency and stuff that you learn in the MSW program...But I think that they could have done a better job of getting you acquainted. They kinda throw you in, which for me was ok because I had been in mental health, but I think for newer, younger graduates, it could be—especially the clinic I work at—we work with severely mentally ill adults, there's security in the building, these are some very chronically

mentally ill individuals who have a lot of different symptoms going on that it can kinda be like, 'ok, go,' and you just go, you know?

Rachel, a 30-year-old with a BSW, is an example of someone who received a hit-and-miss orientation that began at the agency with getting some training, but things changed dramatically when a supervisor responsible for helping her learn some of the nitty-gritty items got fired, and there was not a back-up plan for her orientation. She had to rely on getting what she needed from anyone that was willing to help.

Rachel: Well, it was a little bit of a bumpy ride. The first couple of days of orientation was just to the agency and in general, and the policies of the agency and then well, we did a lot of following other case managers to see how they did those things, and the day one of the supervisors was supposed to go more in depth about technicalities of one of the programs, she got fired. ...and we just relied a lot on our peers to train us and help guide us to know what to do...

It appeared that the length of the orientation process was often determined more by the needs of the agency for getting a caseload covered than ensuring that the graduate was competent enough to provide quality service. Gloria, age 30, was just told to start seeing clients even though she was pretty hesitant about it. She had to learn by trial and error as she went.

Gloria: No, they were just like... I did get to shadow for like two weeks, and they were like, "Ok, you ready to go?" and I was like Uh, sure... they didn't really say it was an option... they were like here you are, you're ready to go...and I was like uh ok.....They did start me slow and it was hard. It was a lot of just learn as you go which has been true I think in all of the positions I've been in for social services in general. Training can only teach you so much and then you just kind of learn as you go.

The agency orientations received by these new graduates were highly variable in duration, content, quality and support. Not one of the graduates mentioned that being fresh out of school and/or new to the field of social work was a consideration in their

orientation process that resulted in any kind of additional training, an assigned mentor or a protected caseload for more than a couple of weeks.

Preparation from school. New graduates begin their journey into their first post-MSW job with all of the knowledge and experience gained while in school, as well as what they acquired prior to and during their program. Being prepared for the realities of work is important, and once new graduates start working, any perceived gaps in preparation become more evident to them. For those new graduates who took a panic job or one which was outside of their concentration area or their own comfort zones, the gap between expectation and reality was even wider. Most of the participants felt that they had some gaps in their preparation and had to work to learn on the job. Those that felt the most prepared were primarily engaged in case management work. Felicia, a 25-year-old with a psychology background shared,

I feel like I could have been a little more prepared in school, but I guess prepared for what? I'm doing my job just fine—so it's not like there's necessarily a disconnect—I just feel like I should have learned more, feel more competent, but—that's about it.

Those students who felt the least prepared were in jobs where they had to do some therapy with clients. Many of the graduates wished they would have had more experience while in school and practicum with providing actual therapy. Darcy, age 24 and the youngest participant, said that she did not feel “equipped to be doing therapy,” and that she “would [not] have done the families any justice and would have been pulling it out from the sky.” Greta, age 26, focused on health care in the MSW program, and her first job was providing therapy to clients with complex mental health issues. She felt unprepared despite having completed a practicum with this same supervisor and client.

Greta: I didn't have much access to individual, like shadowing any kind of individual counseling experiences throughout any part of schooling ...so I only had exposure to group therapy throughout my education because I wasn't given enough freedom as a practicum student to really try to conduct an individual session or anything myself so I can truly say that the first individual session I conducted was in a real job after graduation. I had never taken a class that had given me more than, I don't know, maybe half of a chapter on what CBT really is, but then I got into the real world and I'm expected to know how to walk it and talk it and plan it out and implement it and I was so unprepared to actually conduct real counseling with people.

Several students said that preparation for the world of work was something that they consciously thought about while they were in school. They were more focused on what they would need to know for their career than on what grades they received in class. Wendy, Laura and Willow, among others, were very intentional about preparing themselves in school for what was ahead for them in their employment. They all said that they were amazed at how many students were more focused on the grades or on just getting by. Willow, a 37-year-old, said that, "Overall, I say "yes" I was prepared and I think that is because I intentionally tried to prepare myself...I knew what I wanted and so I was gonna go get it." Wendy, a 29-year-old, and Laura, a 28-year-old, were very thoughtful while in school. Both had at least two years of experience post-BSW before entering the MSW program.

Wendy: I loved the MSW program, I really did. But, and I've talked about this with other people too, I wanted to get a lot out of it. I wanted to love it, I wanted to learn a lot, I wanted to read, I wanted to do the papers, I wanted to get the feedback, all of that was important to me and I think part of that was because I had had a couple of years of working, and so I knew I really need a lot more education on this. I just really went into it thinking I am going to get every penny worth of this program because when else am I going to have this opportunity to have these professors who are incredible, who publish things and can really share experiences, and when else am I going to have this opportunity, that they are there just to answer my questions, I am never going to have that opportunity again. So I really thought for me the program was fantastic.

Laura: ... the only part that I struggled with in my Master's program is that I had an expectation that at this point, people would be like me in the fact that we've already had a little bit of life experience, we're past the whole "I have to have an A+ or else I'm gonna be mad at you" state, and that wasn't the case. There were a lot of younger people that surrounded me that were so obsessed with making sure that they got an "A" that it's all that they concentrated on and my fear was that for many, many students, they did not read the information. They did not have the mentality of "I want to become a master of this profession because..." fill in the blank—I really wanna work with [medical] patients and it is reckless for me to go into that line of work without wanting to be a master of my profession.

Practicum experiences, while helpful, may be very different than real-world experiences, as Heidi discusses. Heidi, a 27-year-old, got hired from her practicum, so in many ways she was prepared, but she also realized that she was not as ready as she thought.

Heidi: It was pretty much the same, so of course, as a student, I didn't have as much responsibility and I didn't get to do a whole lot of therapy as a student. I had to shadow a lot of it. I did do groups, I did intake, but overall the position was actually really similar..... I would say the biggest challenge was just the balancing of the time because as a student they really babied me, it was like you have one thing to do today and my supervisor was always there literally behind me as I needed help and I didn't have the huge case load and I would do one intake a day as a student and so now it was you have to balance all these things, so the work load definitely increased by a lot when I transitioned.

In general, there was a wide variability of participant feelings about whether or not they were prepared to practice. While some felt prepared by school for the most part, others felt that there were big gaps. Those participants providing therapy felt the least prepared. Several participants felt that preparation for practice was something that individual students needed to think about while they were in school and focus on acquiring needed knowledge and skills versus just getting good grades.

Expectations versus reality. In terms of preparation, most graduates have expectations about what the job will be like and for some, reality was much different than what they expected. There did appear to be a gap between expectations and reality, and new MSW graduates began to experience this disconnect after they had been on the job a relatively short time. Greta, age 26, knew what she wanted to do and was hired way before graduation, but was surprised at how her ideal job did not seem as satisfying as she thought.

Greta: So I had this big ole plan before I even crossed the finish line, I knew what I was going to do, ahead of everyone—we all signed off on things, made contracts and I was good to go. So then graduation comes and I began both jobs right away— it was so weird to take all of my ideals and all my thoughts and ideas and somehow just implement them in real life and I don't think—nothing could have prepared me for what that was like because as soon as I did it, I realized that the things I was actually interested in and the way I really wanted to spend my time was a lot different than like the idealistic plan that I created almost six months before I even graduated ...and so then my first little chapter right after grad school was very interesting and a little heartbreaking because I had ramped up with all these perfect plans in this little trajectory I thought I was going to be set up on and then I had to be really honest with myself even after the first eight weeks of living it out that it just didn't feel right.

Charlotte, age 32, was also surprised that providing therapy was not nearly as satisfying as she thought, and she felt bored relatively quickly. She said she thought to herself, “Why is this not more entertaining?”

Another common experience with how reality is different than what was expected was the agency's productivity and billing standards. Several graduates commented on how they had to really focus on productivity and how they felt pressured much more than they expected. Helene, a 27-year-old, liked doing clinical work, but found that the agency focus on billing and productivity was overwhelming and ultimately caused her to take a break from clinical work.

Helene: I would like to do more clinical work and I liked that in my PRN job, but I think being a new grad and having to pay off your student loans—there's not a lot of jobs that you can, I think, go into unless you've done the work and feel confident in really starting to use your clinical skills when the jobs that are out there are the billable service jobs and that's fine, but there's already so much pressure to really hone in on your skills, in general, being an MSW and starting to do real clinical practice that when you've got that on top of 'I have to meet a productivity standard and have to know all these in's and out's about Medicaid' and what words you can and can't use in a note, how you can and can't report, on what you should and shouldn't report and all that—it just kinda gets muddled up... it was kind-of too many things starting to pile on that weren't giving me job satisfaction.

Another way in which expectations were different from reality is handling the difficult client situations on the job. While social workers anticipate difficult topics and clients to some degree, reality can still surprise them. Paula, age 41, works in child welfare and probably gives one of the more vivid examples of some reality shock of how work is different than what she thought it would be like.

Paula: Yeah [school prepared me], but on the other hand, no. I mean, nothing that you could have provided me or anybody else could have provided me in school will prepare you for the moment when a five year old looks at you and goes, 'yeah, I had sex with my uncle last night.' You tell me where that's in the textbook because holy crap, the first time—and I hope to God it's the last—when that comes out when you're playing Barbie's on the floor—there is no—the first time you feel like your blood boiling because you are looking at a child that is covered in bruises from head to toe. Those are the moments when no—there is nothing anybody—I don't know that there's anything anybody could have done any better, but that gap between knowledge and experience is huge. Huge. And in some ways, it's a detriment because I was so programmed to be head heavy.

Graduates also have expectations of what their first job will be like, and when those expectations are not met, it can be difficult. Both Kellie, age 46, and Candace, age 33, experienced some disillusionment in their first job. Kellie expected that as a school social worker, she would be on her own, but she was shocked at how the student's psychosocial concerns were not a priority to the teachers or administration. Candace,

who is 33, found her biggest surprise was over her realization of how little control she had over the performance indicators that determined her success in her job. “So that’s been very frustrating to know that I’m getting graded on all these outside factors that I have no control over, so that’s probably been the hardest thing for me to adjust to or the biggest surprise.”

In summary, graduates in this stage jumped into their job and were given some kind of an orientation to their job, became aware of perceived gaps in their educational preparation and also experienced some kind of disconnect between what they thought work would be like and what it actually was. Several of these issues became more intense as they moved into the next stage.

Sinking or Swimming

After the new graduates get through agency orientation and begin to get the lay of the land, they then move into the *Sink or Swim* stage where they struggle to survive in the job and deal with all of the new experiences that they are encountering. The idiom to sink or swim means to “succumb or succeed, no matter what” (Farlex, 2015) a sink-or-swim situation is "one in which we must save ourselves by our own means or else fail. The image is that of a person thrown into the water without a life preserver; he or she must swim or drown” (Dictionary.com, 2015). This idiom was chosen because it resonates with the participants’ sense during this stage they must either find ways to succeed in their position or they would need to leave the position or perhaps even the profession of social work. The term also reflects many of the participants’ realization that whether or not this was an ideal job, ultimately they themselves must find a way to adjust and/or thrive in their position despite the challenges it presented.

The crucial question to be answered during this phase is, “Will I make it in this job?” This phase involves lots of make or break issues evoking many emotions. Will you survive, or will you have to leave because it is too tough? Surviving, or swimming, in a job means that you have to know what to do in complex situations. It means applying what you learned in school to real-life situations. You have to show a measure of competence or be exposed as an imposter. You also have to show that you are worthy of your degree, and this can be anxiety-provoking. It means staying afloat despite the challenges you encounter from the job and the clients. The sinking part of this stage is about feeling uncomfortable with being new, not knowing, not getting the information that you need, and not feeling supported. It is also about feeling personally vulnerable and struggling to deal with dangerous situations on the job and trying to cope with a myriad of intense emotions. Again, these are issues that can be encountered at any time during the journey of being a new MSW, but they are most salient after orientation has ended and the real work of the job has begun, which is usually several months into the job. The important issues to explore in this stage are: 1) How these new graduates negotiate not knowing, 2) getting (or not getting) quality supervision, 3) dealing with intense emotions, 4) experiencing dangerous situations, and 5) leaving, or contemplating leaving, a job. Any of these situations could sink a new grad, or they could also be instrumental in helping them grow and flourish. It should be noted that all of these themes are emotionally loaded and can be difficult for the new graduates to experience.

Not knowing. Not knowing is a very common experience for anyone new to any profession. Encountering the unknown is bound to happen on day one and continue for many months if not the entire first couple of years on the job. How the participants

negotiate this territory of not knowing is very important as it could set the stage for their happiness and stability on the job. Many participants found that they were largely on their own to figure out how to do essential job tasks, or were surprised at how much they did not know. It is often a difficult and humbling experience for the new graduates.

These participants describe their reactions to feeling that they did not know what to do.

Greta, age 26, describes the fear of exposure:

Greta: ...Because you don't want to lift the hood and reveal that you don't have it all figured out because you're asking questions to a lot of the people who are depending on you to do work with other human beings and care for other people and work with really serious issues, so there's a really delicate balance in figuring out what to reveal about my lack of knowledge of something and what do I want to portray as I develop myself as a professional and I want to be seen as an adult, not as a kid, and I want to wear high heels now and I probably should cut my hair because I have blonde hair dye in it—it was just this growing up process that was really—it was really humbling, yeah.

Balancing your need to know new information with not looking incompetent is a difficult task. Darcy, age 24, talked about how it was embarrassing not to know. She says, "Well, I felt stupid! It was more of a pride thing for me!" Wendy, age 29, admits openly that "I had no idea what the heck I was doing. I don't like feeling like I have no clue what to do, I don't like that feeling." She struggled with learning how to do hospital discharge planning after coming in from a different area of health care. Myra, age 28, articulated that it felt dangerous not to know what to do and it felt like she was experimenting on clients. However, she felt that she was in a high-stakes job in hospice and that left little room for error.

Myra: [talking about working in hospice]and so I felt like I was doing this huge disservice to the families because it's like, they are just, they are grieving before the person has passed away and then the person is dealing with all of these end-of-life issues and I didn't have the right tools to really be a benefit to them. I was learning from them and I kinda felt like if a

surgeon goes in and they're like, 'I'm just gonna try it out and see what happens if I cut this gut open,' that's what I felt like I was doing.

The emotional reactions above showed how humbling, scary, and uncomfortable it was for these new graduates not to know.

So, how did these new graduates respond to not knowing? The vast majority of the graduates had specific strategies for getting the information they needed to function effectively, such as going to the library, googling, buying books, talking to co-workers, supervisors and even social work friends. Greta talked about how she did her own research. "Yeah, so I ended up just going on Amazon and buying books, watching trainings online, things like that—it's how I prepared myself to do it." She is a very typical case as many others, such as Felicia, Wendall, Cara, Olivia, and Glenna, also put in extra time and effort to prepare themselves for the job. This was above and beyond any official agency training that they received. Most of the information that they sought was available on the web. Felicia talks about all of the strategies that she employed to get the information she needed:

Felicia (age 25): I Google—And the library, yeah—I get a lot of books like motivational interviewing with kids and yeah, just check out a bunch of stuff. Yeah—I got all sorts of stuff—and I go to training, too. I try to sign up for extra trainings. I've had to ask tons of questions, ask to shadow, ask my boss to role play scenarios, I've looked at videos online, I'm always ordering books from the library—I'm not ready, I don't know what to do in this situation or what's the best therapeutic approach, but anyway, I don't know if anyone else is doing a better job than me, maybe they're just not being open about their struggles.

Glenna, age 49, shared that her training has largely been self-directed. "A lot of it, though, I've done on my own—reading, buying lots of books, I've got a library—[I'm] reading about best practices for whatever I'm dealing with." Cara, age 26, takes this

responsibility to educate herself as critically important as she says that “my license is on the line.”

Almost every participant expressed discomfort about not knowing, but they used different strategies to gain a sense of competence. As mentioned above, the new graduates sought out books and information on the web to help them look competent. They also dealt with not knowing by asking a lot of questions. They felt like in order to get the information they needed they had to get over being worried about looking foolish. They gave themselves permission not to know and to not let that make them feel inferior or incompetent. Charlotte, who is 32 and already fairly experienced in the social services world, encourages others to admit when they do not know something instead of remaining silent. “Don’t be afraid to put yourself out there and say ‘I don’t know what the hell I’m doing,’ and that’s ok!” Two exemplar quotes show the difficulty for new graduates in expressing that they do not know and giving themselves permission to ask questions without seeing that as a personal deficit. Both talk about feeling humbled in needing to admit that there was much they did not know.

Greta (age 26): Because it [not knowing] really broke me down to my core, I’m so much better for it and I’m really happy that it happened, but it was really humbling...I think that I got over my fear of coming off as really young, naïve and inexperienced because I was young, naïve and inexperienced, so I gave myself permission to ask other questions I needed to ask and get the support I really needed and I guess I just kinda found my voice and allowed myself to feel a little bit embarrassed with her to ask the questions that I needed to help me just orient myself in my own individual process as I did it. I realized that she wasn’t going to read my mind and I realized that I carry myself in a really confident way so I shouldn’t assume that she would understand that deep down I had all these butterflies about the whole experience. I just realized I need to just use my words.

Darcy (age 24): I think one, you don’t know everything and you’re not gonna know everything. That was a big thing for me. I mean, you want–

if you don't ask for help then you're really only hurting yourself, so it's hard trying to balance that, like I should know this, I have my MSW, I shouldn't have to go ask my supervisor or someone who has a BSW, but who's been in the field longer, you need to have some humility and so that was something that I had to learn where it was okay to say, "Ok, what do I do here? I don't really understand what I'm doing," and learn that they actually expect that. That's ok! You're starting a new job, you're not gonna know everything, you're not gonna get it perfect.

Negotiating the process of not knowing and owning being a novice seem to be critical parts of the experience of being new for many of the graduates. This acknowledgement allows them to move forward and openly express questions and begin to engage in new learning.

Supervision. New graduates often rely on supervision to help them survive on the job. Supervision was an extremely variable experience for the new graduates. For some of the graduates, it was hit or miss, but for others, supervision was extremely helpful. Of course, supervision can be helpful throughout the term of employment, but it is particularly critical for the new graduate to be able to find a safe place to ask questions.

Some of the good experiences with supervision were as follows:

Cara (age 26): My program director gave me my supervision and she was licensed and so the entire time from June to November I would get to see her at least weekly for a supervision hour, or if not, I would go into her office and ask her a question. She was my only go-to person.

Myra (age 28): [Referring to her second job] I've been really lucky because my supervisor—she's been with the agency for 14 years, she's an LCSW and she's so ethical and straightforward, she's a really wonderful supervisor. Of course, when you start out, or even now, I make mistakes and she's like, 'that's ok, we can fix it, and here's how, here's the steps we need to take, here's who I'd like for you to talk to,' let's move forward, let's correct that and move forward and I work really well under that environment.

Lucy, a 28-year-old who is new to social work, intentionally sought out a supervisor who would be able to provide a lot of support and cater to her being a new

graduate. She sized her up during the interview process before she even took the job. She had a difficult practicum with a critical supervisor so she knew that she wanted someone who was not going to shame her or make her feel stupid. “I knew I needed someone really strong—someone who really wanted to teach and ... someone who was pretty patient and could kinda handle my extrovert freak-out moments where I’m like, ‘I don’t know what to do!’”

There are others who have had less than stellar experiences. Kellie, Carla, and Sarah are examples of graduates that have less than adequate supervision. Situations which fall into this category are graduates that get no supervision, supervision from a non-social worker or supervision that is spotty or unhelpful. Kellie, age 46, works in a school where she is the only social worker and has had to train herself by networking. Carla, age 29 and a former teacher, had a supervisor with a different degree and who was not at all strengths-based. Sarah, age 30, was unsupervised as a result of her supervisor’s absence due to a family emergency. She did not have anyone formally meeting with her in her absence, and made a decision on her own which cost her job.

Sarah: I should back up and say that this whole time I didn’t have a supervisor. My supervisor...went on leave, and we didn’t know when she was coming back, so, I was totally unsupervised that I was doing this job at [multiple] schools and so anyway, [discusses incident with client] and documented everything, well then about three weeks later, my supervisor came back and read it in my notes, and they fired me on the spot over it.

Brenda has to pay for supervision since she is not able to get it on the job. She is in a health care area, and in those settings it is not uncommon for social workers to be supervised by a nurse or a non-LCSW social worker. She says, “So supervision has been very difficult—even a lot of jobs I interviewed for that I didn’t take—most of them were working pretty independently and did not offer supervision, so I pay for supervision.”

Often the other disciplines have no idea about what appropriate supervision is required for social workers, and so are not able to advise them about it. Myra is supervised by a nurse and felt that she did not get any specific help but was just waved off when she asked for help. “She was like, ‘you’re doing fine! It’s all about experience,’ and I was like, these are very big issues and once that person’s gone, they’re gone.”

Perhaps the worst example of supervision was from Gina, age 26. She worked with sexual abuse perpetrators (often victims themselves) and began to have difficulty on the job with hearing the stories of the clients. She began to develop symptoms of secondary traumatic stress, which is characterized by both behavioral and emotional consequences of working with trauma and can include intrusive thoughts, anger, sadness and anxiety (Bercier & Maynard, 2015; Bride, Robinson, Yegidis, & Figley, 2004). Her symptoms became significant and intruded on her personal life outside of work, but this experience was not validated or intervened with by her supervisor.

Gina: My supervisor—I kept telling him I was having these symptoms—I was like I can’t sleep, I was having panic attacks before work, I was just not well at all and he just kept telling me I was just overreacting and it wasn’t a big deal and I just needed to get over it, basically. So eventually I just decided that I was gonna leave and originally I wanted to give them two weeks, but they asked for a month and I was like, ‘I’ll try,’ but I don’t know—Yeah, there just wasn’t a lot of good support with this job. After two weeks, I just called and said I can’t come in and they said I couldn’t work at this agency again and I was like, ‘Fine, I don’t want to.’ I just feel bitter about it.

She needed to get therapy and get a non-social work job for a while before returning to the field so that she could heal from the experience of not just the vicarious traumatization from the client stories but also from the way she was treated as an employee. This is indicative of poor supervision and not simply an employee who was

ill-equipped to deal with this population. While Gina was the only one who experienced this level of trauma, the number of new graduates who experienced poor supervision is noteworthy.

Dealing with intense emotions. The vast majority of the participants specifically mentioned having to deal with intense or overwhelming emotions. The participants expressed a wide variety of intense emotions in regards to how they felt about encountering new experiences, their supervisors, difficult clients, and problems encountered in the workplace. The experience of being a new employee in a first post-MSW position can provoke some significant anxiety, but coupled with the variety of intense client situations and pressured environments they were experiencing, these emotions were often amplified. Several participants mentioned that they had higher levels of anxiety than they have ever had in their lives, and struggled to cope. This anxiety seemed to stem from worrying about not doing a good enough job, proving themselves, worrying about the clients, and perhaps absorbing some of the clients' own feelings. Greta is particularly a good example of discussing how her anxiety became ramped up and she decided that she was going to have to deal with it head on, or be consumed by it.

Greta: ... I admitted to myself that even I couldn't handle imperfection in people's life perfectly. That I was going to have to experience it and process it and probably in a messy way at first, too, and that was okay...I had all sorts of it [anxiety]— yeah, like personal and professional. ...I started to see other people around me who were not taking the time for themselves to do that and so I just saw it spilling over into other categories of their life or—it was motivating for me to figure it out—to realize everybody's going to have some kind of a human reaction to this junk and so better to humble myself and acknowledge it and figure out how to process it than pretend that I'm better than that and more super-human than that then end up just bursting into tears at a staff meeting, you know?

Lucy also had a lot of emotional reaction to just dealing with the experience of being new as well as having to deal with the clients at her workplace. Her anxiety about not doing well became very high and luckily her supervisor was helpful in normalizing the experience of being new for her. Her supervisor also used the metaphor of learning to swim, which helped her to understand that becoming a social worker is a gradual process that comes with a big learning curve, and advised her to adjust her expectations accordingly as evidenced by the following:

Me: ... so this is sort-of a new area for you, new acronyms, new stuff, so what did you do to sort-of get on board and learn the lay of the land?

Lucy: I freaked out a lot, I cried a lot—I cried—a lot!

Me: At work or at home?

Lucy: Both. It was very overwhelming—actually funny story—my supervisor put me on a behavior plan because I was crying so much at work. She was teasing, but serious—and luckily my supervisor said, ‘you’re gonna feel like you’re drowning for the first three months.’ She goes, ‘six months—at the six month point, you’re actually gonna feel like you know how to dog paddle and then by a year you actually feel like you know how to do the strokes.’ So, obviously she’s been a teacher for so, so long, but—so like the first three to six months, I was worried about everything. It was also a first job, so it was very shocking to actually be not a student back in the real world, not really knowing how to do anything so I just asked a lot of questions.

Me: Was your anxiety level pretty high?

Lucy: Very! Very high. I think I was just so scared about screwing up....

Lucy’s supervisor was astute enough to understand the experience of a new professional and to normalize it, but this kind of support from a supervisor was a rare experience for the participants in the study. The vast majority of them were on their own to identify and then deal with the intense feelings that their jobs brought up for them.

Several of the new graduates talked about dealing with their own reactions to client stories, and the difficulty in processing those stories. Both Paula, age 41, and

Kellie, age 46, needed an hour buffer zone after work in order to be able to shake off the day before they could talk and interact with their families. They shared heartbreaking stories about the youth with whom they worked. Many worried about clients and that worry stayed with them even after work hours. Also, several participants were dealing with client grief and pain, and became very emotional when discussing these stories as they touched them deeply. Several had homeless clients, clients that were abused, and clients that were just going through terrible life circumstances and they empathized with them and felt their pain. While all social workers continue to have this experience, new graduates may experience these feelings with even greater intensity because they do not have the experience with hearing the stories and they are still developing self-care strategies to deal with all of the stories. Also, new graduates are already experiencing more heightened emotions due to just being new and still being in their learning curve.

New graduates also experienced some other emotions that were intense, notably frustration and anger. Several participants talked about incidents in which they were not respected by others. This lack of respect was either noted because it was due to people not respecting social work as a profession, or there was some personal disrespect toward the participant. These incidents were unsettling and created some bitterness. In terms of those who felt social work was not respected, they were in interdisciplinary settings and noticed that other professions, such as nursing, were given greater pay and access to decision-making and they found that hard to take. Wendy is an example of seeing the differences in pay and status in health care settings.

Wendy: Yeah, the nurses who have masters in nursing, the vast majority of them are in supervisory roles or in specialized roles that I know make significantly more than we do, and it is so frustrating because I know that the nurses that have just their two year degrees, and their basic RNs are

starting at a higher base salary than people who are masters educated and some of which were clinically licensed and can practice independently. It's so frustrating...

Others felt personally disrespected by a supervisor or even by clients. They struggled to deal with feeling that they didn't have a voice or that people were treating them unfairly or rudely. Most of this anger was directed at supervisors who had unfair expectations or did not understand the position the new professional social worker was in. Hannah, Wendall and Olivia all experienced anger at supervisors that they felt treated them unfairly or inappropriately. However, clients could also say inappropriate things to the participants, and that could be upsetting. Darcy relates having male clients hit on her, and she felt angry that they put her in that position. She said, "It was so inappropriate, I was so disgusted—it freaked me out."

Gina, age 26, had a particularly difficult time with emotions, as was previously mentioned in regards to her experiencing secondary traumatic stress from hearing the stories of the clients. She became very anxious and began having intense feelings about the stories she had heard, which led to her leaving her job. She recalls, "I wouldn't be able to sleep, I would have intrusive thoughts about these things, I would constantly worry about my clients." Heidi, age 27, also talked about worrying about her clients, and one of the biggest surprises for her going from being a student to an employee was the sense of responsibility she felt for her clients. Even though she had a team, she had to make the best decisions that she could, and that felt like a huge responsibility.

Several clients also mentioned that they felt overwhelmed by the chaos in their work environments. As Heidi says, "It is chaotic, and it's chaotic everyday...Sometimes I didn't even have time to drink water or return my messages and I can just feel it physically and I feel irritated." Chaotic environments make it much more difficult for the new

graduates to deal with clients and with their own emotions, compounding the intensity of any issues for them.

Dangerous situations. Another issue that multiple participants presented with was having to work in dangerous situations, or with potentially dangerous clients, and feeling personally vulnerable. This is definitely a struggle for the new graduates as they have to decide if the position is worth the risk or not. This brought up intense feelings of fear, anxiety, and empathy for the clients that have to live and survive in these dangerous neighborhoods. Saundra, age 35, made home visits to adolescents in very dangerous neighborhoods. She had to meet productivity standards by seeing the clients on a regular basis despite the neighborhood being frequently volatile.

Saundra: Uh, I actually have a client that lives [where there was] a shoot-out in and so I meet with him, I have to go with the case manager, we have to go together, and he's always getting shot at and people use his house as a target, and so we have to really, really watch ourselves going out to see him. We tried to make it where he would come to the office but then his, he lives with his grandma, and she doesn't have transportation so we have to go to see him because we have the referral and we have to stay on the good side of probation and we don't want to say we aren't helping these kids. But that's one part of the job that I really hate.

Other participants discussed the issue of doing home-based work in dangerous neighborhoods. Myra says that she routinely sees the neighborhoods that she works in on the news in crime reports. She says her husband is worried about her and wishes that she would quit the job, but she feels very connected to her mostly older adult clients. While she has not experienced any violence herself, she is aware that it happens routinely in the places she visits. She says, "...and then I just went to go see another one of my clients and I guess the prostitutes have taken over her back porch and they're using it for their sex acts." Paula spent considerable time talking about how much she thinks about safety

on home visits and plans out the visit and behaviors to make sure that she could escape or call for help if needed. Myra said she is conscious of “how I walk, how I dress, I dress neutral colors as much as I can, flat shoes, I’m not supposed to take my purse in places, but I don’t know how else I would carry my phone and my Mace.” These participants all have to rely on their own critical thinking about safety in the community in order to ensure their well-being on a daily basis.

Several other participants worked in dangerous work environments including residential or institutional settings. Lucy, age 28, works with adolescents who are often bigger than she is and often have temper outbursts which can be scary. She reports that she has had items thrown at her, but says, “I’ve been able to dodge.” She says she feels like she has had adequate training in how to deal with this aggression, and so denies being very afraid despite the volatile nature of the clients and the closed quarters. Gina did not feel safe in her setting either, and was often worried about her own personal safety with the clients. Of all of the participants above, only Gina has left because she felt so unsafe and traumatized by the setting and the client stories. The other social workers are still managing the dangerous situations in their respective positions.

Changing jobs. A majority of the new professionals in this study (17 of 27) changed jobs during their first 18 months of employment, and even more were thinking about changing jobs at the time of the interview. Four of the graduates have had three or more jobs during this time frame. This is a significant finding as it speaks to the potential job mobility of this group of new professionals. Some of the reasons for leaving a job were an unsupportive or unhelpful supervisor, lack of challenge, a better opportunity, less caseload or chaos, and wanting to find a better fit for their training and interests. Those

graduates that took a panic job often decided after a while that they wanted to seek a job that would better what they had originally wanted to do, or something that better suited their evolving interests.

The most prevalent reason the participants gave for leaving a position was a difficult supervisory relationship. Myra, 28, took the first job she was offered, and then felt bad leaving a job after three months. However, she had very little supervision and received instructions from the supervisor about how to practice that seemed unethical to her. She blamed herself for the lack of fit initially, but then realized that the job was simply not a good fit for the above mentioned reasons. She recalls upon thinking about leaving, "...It felt awful—I felt like a disappointment, like here it is, my first job, I've just gone and had this education and I'm already not a good fit some place." However, as she continued on in the job, she feared that her license was on the line and she felt more and more uncomfortable with the business practices of the organization. Olivia also decided to leave her job because of a contentious relationship with a new supervisor who was not a social worker. She grieved about leaving the clients, but felt that she was being pushed out. It was very difficult and she went through considerable emotional pain after leaving and did not immediately get another social work position, as she needed some time to recover and also search for something that would fit her needs. Hannah left her job because she felt disrespected by her supervisor in how he handled communication about changes in her position, and the place seemed rather chaotic. She became increasingly frustrated and finally got to the point where she decided to start looking around and found another position fairly quickly doing something in the health field, which is what she originally wanted. Wendall also had the same experience of feeling that he was

disrespected by a supervisor and chastised for what he considered highly ethical conduct. He was looking for work at the time of the interview in response to this treatment.

Almost as many new professionals left a job, or were planning to leave a job, because they did not like the work, and felt like it really was not what they wanted to do. Marli left her job in a community mental health center because she felt ill-prepared and it was not at all what she wanted to do. Another grad, Heidi, wants to put in her two years and then join the Peace Corp. Several others left their first position looking for a better fit. Two of the graduates were fired, and had to deal with feeling of anger and hurt over that. Sarah was let go due to her supervisor's view that she violated an agency policy that she did not even know about, and Olivia was let go by a supervisor who felt she was not handling the families well, although it was the same behavior that she got rave reviews for from a previous supervisor.

Getting enough supervision to sit for the advanced licensure exam is enough incentive for many to be able to put up with high caseloads, lack of challenge and agency chaos. Heidi relates that she will put in her two years at the agency and then begin looking for something that she likes better without so much pressure around productivity. She states, "So I'll have two years this summer, so I'll be re-evaluating what I wanna do. I think the money is a big part of it." Greta also agrees saying that, "I'm doing that work full-time right now because I want to have an LCSW just because I'm so close to it ...and then I'm going to stop doing individual work for a really long time, I think." Many of the graduates are gutting out a job until they complete their two years of post-MSW supervision so that they can take the licensure exam, and then intend to leave that job.

Treading Water

The fourth conceptual stage that new MSW professionals navigate is *Treading Water*. The expression to tread water means to keep one's head above water by remaining upright and pumping your legs (Free dictionary.com). In this case, it reflects the new graduates' fragile stability, and that they must exert effort to stay afloat or they will go under and perhaps become overwhelmed by the job. The question asked by this phase is, "How can I keep my balance and stay afloat?" This balance has to be maintained between being stressed and doing good self-care to combat that stress, and also balancing work and home life. In this phase, several issues become salient: 1) dealing with compassion fatigue/burnout, 2) practicing active self-care, 3) taking stock of and appreciating what they like about their jobs and feeling good about making a difference in the lives of clients (compassion satisfaction). It is the simultaneous mix of all three of these that interact upon the new professionals in various ways. New social workers can be simultaneously burnt out about the logistical aspects of their job while still experiencing positive feelings about helping clients.

Compassion fatigue and burnout. Compassion fatigue and burnout are concepts that are sometimes used interchangeably, and there are overlapping definitions in the literature. Compassion fatigue can be defined as the behavior and emotions resulting from helping clients with traumatic experiences (Kapoulitsas & Corcoran, 2015). Burnout tends to be more about environmental factors, such as lack of support to deal with work-related stress (Hunsaker, Chen, Maughan, & Heaston, 2015; Thomas et al., 2014). It is likely that most of the graduates experienced one or the other of these phenomena, and many experienced both.

This experience of burnout or compassion fatigue is an unexpected one for most of the graduates. Many were surprised how soon they felt such symptoms as a lack of empathy, irritability, frustration and disillusionment. Wendall says, “And so I didn’t honestly expect, I knew I tend to take work home but I didn’t expect it to be that powerful.” Carla was also surprised by how fast her feelings progressed:

So I definitely got burned out, and I remember in school it being talked about, in every class, and I am thinking this is not going to happen, I love social work, I want to be here, but it does. And it happened quickly, like very quickly.

Burnout or compassion fatigue can be defined by people in different ways, and so participants were asked how they knew they were burnt out if they used that term to describe their situation. Cara describes organizational factors that contributed to personal feelings, which bled over into her home life. She described a grueling work environment in which she and all her co-workers stayed routinely until late in the evening to finish up paperwork. She described all of the interdisciplinary team members in the hospital where she worked as being burnt out as well. Perhaps the most significant example of burnout was experienced by Laura, who went through extreme organizational chaos during some downsizing at a hospital. She and all of her co-workers felt every day like they could be let go at any time, and this continued for many months. Over time, it took an enormous emotional and physical toll on them all.

Laura: ...and just complete utter burn-out, just totally—I can’t function anymore, my marriage is suffering, my home life is suffering, my well-being is suffering, I’ve gained weight, I’ve lost weight, you know—all different kinds of things happening—just totally depressed, I mean, seriously—not sad, but like depressed! All of us! It was really, it was very sad!

The most mentioned area regarding burnout was caseload size. Cara says, “There is too high of a workload and I do not have good boundaries or self-care.” Brenda described having 50 clients in hospice and working 12 hour days to keep up until she got to a breaking point. “But it wasn’t until I just broke down crying one day that I was like I couldn’t see everybody every two weeks, it’s too many.” Gloria said that her current caseload was pretty unmanageable as well. “But I think the only thing that I kind of dislike right now from the position is the caseload is just crazy, I mean it’s just there’s so much to do, it’s impossible. It’s just very stressful.” Often the graduates got to a breaking point where they had to talk to their supervisors and get some additional support. Several of them did receive support, and others were just given encouragement to hang in there until things got slower, which does happen periodically.

Other participants described experiencing compassion fatigue, being overwhelmed by continually expressing empathy while hearing difficult client stories. Myra worked in hospice right out of school and relates, “And then there was so much emotion, it was so sad and I didn’t know where to go to process it or to help these people to make myself feel better.” Felicia says that despite her active efforts at self-care, she experienced considerable mental fatigue and dread about going to work.

...I have to take care of myself so I can maintain and not burn out, but that bothers me already, I’m only 25 and some days I’m just like, “I can’t deal with you anymore,” or “Leave me alone!” [I think it is about] I’m not sure if I’m being effective, making a difference or just being overwhelmed by the scope of their problems that it’s like, ‘well it doesn’t really matter!’... and I see a lot of trauma and abuse.

This phenomenon of compassion fatigue was extremely common. Many of the participants talked about working with clients that were experiencing trauma, or were victims of abuse, clients that had intense resource needs, such as homeless veterans, and

clients that were experiencing difficult personal mental health and health situations.

Some of the signs that the participants experienced included not wanting to go to work in the morning (Felicia, Charlotte), feeling that they are not communicating with their partner very well (Wendall, Carla), irritability (Cara, Heidi), feeling bored or lacking empathy (Charlotte, Gloria), isolating (Carla, Charlotte), not having any hobbies anymore (Wendall), watching too much TV (Darcy), shutting down (Paula, Kellie), not sleeping (Sarah), feeling overwhelmed, being physically exhausted (Charlotte, Glenna), and suddenly having high blood pressure (Brenda).

The participants identified multiple causes of burnout that were organizational in nature. These reasons included high caseload and pressure from bosses to make money (Darcy, Rachel, Helene, Wendy, Cara, Sarah, Laura, Brenda, Heidi), feeling “sucked dry” by clients (Heidi), extreme downsizing and agency chaos (Laura), lots of driving (Saundra), being overworked (Laura, Glenna), being on call a lot (Wendall), lots of crisis work (Myra, Paula, Heidi), and having a difficult supervisor or administrator (Carla, Wendall, Gina).

Several other participants also identified both compassion fatigue and burnout being a part of their experience. Gina experienced both a systemic failure on her behalf and emotional trauma from her workplace, which she subsequently left.

Gina: I cared about a lot of these kids—some of them I didn’t really like that much, but I still had empathy for them and I felt really bad about it and felt like a failure, and I went to therapy for a while afterwards [after quitting] and she was like, ‘this isn’t a you problem, this was a them problem,’ pretty much and they didn’t teach you how to handle this kind of stuff.

Paula experienced both in her job as she had an extremely high caseload with intense work with clients who had experienced abuse and trauma. These feelings impacted her home life and her ability to be emotionally available for her family.

Paula: I don't wanna say I didn't care, I cared very much, but there was a limit in a ceiling that I had that I hadn't experienced in myself. Like before, the phone would ring and my stomach would hurt and it could have been my own child and I would still be like I don't even wanna know. I stopped answering the phone after work hours for anybody. I didn't wanna talk to people, I didn't want to do anything, I didn't wanna deal with it—I was so just flooded, I think, with everybody else's drama...

She subsequently changed jobs within the agency to a position without as much ongoing interaction with clients to more of an assessment-only position so that she could better cope.

Self-care. Self-care was something that the vast majority of participants mentioned as something they were thoughtful about, even if they were not experiencing any feelings of burnout or compassion fatigue. Self-care was described by the participants as something they did to balance out their work stress. There were many strategies identified by the participants as something that they purposely did to deal with the stress of their work including talking about it with a friend, colleague or partner, working out, eating healthy, attending church, having fun with friends or a partner, having down time when first getting home, taking a shower, taking time for lunch, hanging out with co-workers outside of work, and seeing a therapist.

Greta says that she has a variety of strategies she uses. “So I take trips, talk to my mom, talk to my husband, I make sure that I’m friends with people who are not as intense as I am because it reminds me to just be light.” Sandra says that she makes time out to get in touch with her spiritual self. “My church is not far from my job and they have

prayer on Tuesdays and I am able to take my lunch hour and just zip over there and stay there on my lunch break and come back.” Felicia prides herself on her self-care.

Felicia: I feel like I’m the Queen of Self-Care.... I don’t take work home, I don’t work late, I work out three times a week, I go to church once a week, I have friend time, I have couple time, all scheduled, and I eat really healthy, I don’t skip any meals, and I sleep, I go to bed at 10:30.

And despite all of these efforts, she did experience some feelings of compassion fatigue, which surprised her. Lucy felt that self-care was something that she talks about with clients and so it would not be authentic to not practice good self-care on herself. “I had a crazy morning, and one of the other therapists came in and I was doing a crossword and she was like, ‘What are you doing?’ I was like, ‘I’m using my coping skills! I’m taking a break!’”

Part of good self-care for many of the graduates was setting personal boundaries. Many of them tried to leave work on time, make time for lunch, and not take work home with them. Seeing people experiencing lots of difficult things is difficult as the new professionals are unsure about how far to go to help the clients. Kellie says:

You have to have really strong boundaries, and I don’t think—we talked about that in grad school, but I don’t think I realized the significance of needing to have the strong boundaries because you’re definitely gonna wanna just take these kids and take them home and put them in your house and that’s not optional, so understanding exactly what your role is in this child’s life and having the boundaries to know that when you go home on Friday, they’re probably gonna have a really crappy weekend, but you can help on Monday, but you don’t have a lot of support nor is it your responsibility to make sure that they have a good weekend.

One of the most difficult tasks for new professionals is trying to find the balance between doing excellent work and setting limits for their own self-care. Several graduates talked about how they worked extra hours trying to do a really good job, but then ended up letting their work take over their lives. Paula articulates the dilemma

well. How much of yourself do you need to give to your clients? You want to be an excellent social worker, but if being excellent means sacrificing your own personal life, then can you live with being just good enough?

Paula: I said I cannot do my job well and have this kind of a case load and she said, ‘well, then, you need to do your job less well. You’re giving them too much, you’re doing too many things, you’re spending too much time with them, you’re providing too good of a service,’ basically, which was a long time for me to balance that because it’s completely opposite of what my own value system is. When you know how to do something, you should do it very well, and you cannot. Otherwise, you will fail at the job. So you can be a great case manager and a crappy case manager at the same time.

This is an interesting and difficult dilemma for new graduates. Can you meet all of the client needs according to your own standards of what should be done and also excel at self-care at the same time? This is the balance that new graduates are trying to achieve at this stage of their journey. Many of them gave examples of how they had to set limits with the kind of service they gave to clients. Helene had to set limits with her clients as her role was more about case management, and when they began to talk to her like a therapist, she had to cut them off even though she enjoyed it, because she would not be able to keep up with her responsibilities if she let those roles blur. Candace, Cara and many others had to set limits with their coworkers about her ability to handle after-hours situations, even though it was tempting for them to take care of issues on their own time.

Job satisfaction. Many of the new graduates talked about the many satisfiers about their jobs in terms of working conditions, benefits, co-worker relationships, and flexibility. These satisfiers were helpful to the graduates in balancing out some of the frustrations that have already been discussed, such as difficult clients, long work hours,

limited supervision, low salary, and lack of respect. Enjoying the work with the clients was also a huge satisfier and will be discussed separately.

One of the biggest satisfiers for the new graduates was job flexibility in terms of work hours and scheduling. This flexibility seems to help balance out a number of difficult job concerns. Many of the new graduates in their positions at the time of the interview were able to make their own schedule, work from home, and balance work and home life by flexing their hours. For example, Gloria works at home and loves it. She makes visits to clients in multiple settings and feels very in control of her schedule. This sentiment was echoed by many—having control over scheduling was a huge benefit. Others highlighted that they like having creative licensure in their job to be able to develop new programs, find alternate ways of doing things, or revising policies to be more client-friendly. Interestingly enough, very few participants mentioned benefits as a satisfier, although vacation time was mentioned as a way to deal with stress.

Co-worker environment. The co-worker environment is really critical to job satisfaction for the new graduates. While no one mentioned that they were leaving a job due to unsupportive co-workers, as opposed to unsupportive bosses, co-workers were an important part of job satisfaction for the vast majority of these new graduates that seemed to keep them grounded. They made professional friends, and often these friendships led to doing things together after work.

Heidi: So the clinicians, like the therapists, the Master's level people—we've gotten to be a close group, I think a lot of that is from supervision, so maybe once a month, every two months, we'll get together. We all kinda live close-by, too, which is nice or we'll go out after work and our supervisor has actually facilitated a few things, like last year around the holidays, instead of doing supervision, he took us to get a drink after work, so that was nice. I helped one of the co-workers move a few months ago and so there's just little things and that's nice, too.

Myra is an example of someone who really enjoys her co-workers. They are a huge support for her as well as a place to release stress. She returns to the office around lunch to eat with the group and take a walk with them to refresh herself. Candace said that her co-workers were “one of the most cohesive teams I’ve ever been a part of.” Lucy says that she has some “stellar” co-workers and values their input and advice. Paula says her co-workers are “amazing.” Co-workers are a critical piece of feeling like you belong at the agency. It seems critical to have other people who understand the struggles you go through and can give you advice and support when things are difficult. Many new graduates talked about doing things with their co-workers outside of work and how they became good friends.

Compassion satisfaction. In contrast to compassion fatigue, compassion satisfaction can be defined as the personal growth and satisfaction that results from working clinically with clients, and can have a positive impact on social worker’s health, ability to provide services, and longevity in a job. It can also protect against the impact of compassion fatigue (de Figueiredo et al., 2014; Slocum-Gori, HeMSWorth, Chan, Carson & Kazanjian, 2013). The vast majority of new graduates in this study mentioned how much they enjoyed working with clients and found their jobs rewarding. They felt very pleased that they could make a difference with a client in need. Helene said about her work in helping clients recovering from domestic violence, “There’s not a day I don’t come to work that I’m not satisfied at this point.” Specifically, Sandra says, “I love working with the kids, I love seeing the smiles on the kids’ faces...” Felicia also agrees, “I love the early intervention piece that I’m working with kids hopefully making an impact ...for later on in their future.” Heidi talked about feeling that she is making a

difference. “The reason you go into social work is just seeing clients do well. Like some specific examples, it can even be little things like today, I had a client tell me she stopped smoking in July and that was huge.” Brenda talks about what she really likes about her job: “I like going out, meeting new people, hearing their stories and even though our patients are somewhat involuntary, there’s a deep satisfaction in knowing you really helped them.” Darcy also talks about the satisfaction that comes from seeing clients succeed:

Darcy: I don’t always have great outcomes with my clients, but the ones that I do who have—I had one client recently leave and his whole life it really improved since he could be in our program and how we were able to help him and he was so thankful for that... so that’s really satisfying to know that I’ve made a difference.

These examples of feeling like they made a difference are critical to the job satisfaction of the new graduates. They all talked about clients that inspired them, and how much they enjoyed celebrating client success and having some part in it. Both compassion fatigue and compassion satisfaction, and factors that promote resilience will be discussed in depth in the discussion section.

Riding the Waves

Riding the Waves is the fifth conceptual stage that new graduates experience in their journey from student to professional. This metaphor of riding the waves reflects being able to cope and roll with the changes, being flexible and adaptable, and not being tossed about by the difficulties of the job. In this stage, many graduates talked about getting to a place where things are not quite as rocky as they were along the way. They feel more stable at this point and are able to balance the stress of the job with the rewards of the job. The essential issue for them at this stage is feeling more confident and feeling

that they have learned from their struggles. This is the point at which I interviewed most of them, at approximately 16-18 months of post-MSW employment. They were able to be very reflective about what they had learned and what the journey had been like for them. The question that has to be answered for this phase is “What do I need to do to continue to grow and flourish in my career?” When I asked many of them how they were different now than in the beginning, they were often able to talk about confidence and competence. Many are feeling that they are finding their voice and their path now. Several of them are talking about wanting new challenges, such as getting promoted or going back to school for more education. Some related that their beginning selves were almost unrecognizable in relationship to who they are now. Many of them have changed jobs and are in a second or third job that is a better fit for them, and so they are often more content. There are two primary concepts that are salient in this stage: 1) gaining confidence, which involves finding their voice, and 2) wanting new challenges.

Gaining confidence. The vast majority of the participants talked about feeling more confident when they talked with me as compared to their beginning as a new post-MSW graduate. Three exemplars of this process describe their path to being more confident:

Greta: Yeah, and the more that happened, the more green lights I got on my treatment plans and my hunches about what to do next with somebody and things like that and the more people got well—that was really cool! The more that started to happen and the more positive feedback I got from the clients, I started to get more confident and then just felt like I started to be myself more.

Lucy: To me, I don’t think it’s something you can prepare for—I think you just have to know it’s not forever. You’re not always gonna feel like crap—like after going from graduate school to the work force—I think you have to appreciate the journey because you’re gonna—I mean, I feel like every time—I hate this word, but I’m gonna use it, but whenever you’re

“suffering,” or whatever, you’re gonna learn so much more about yourself and it stinks in the time that you’re there, but you’re also like—look what I’ve been through—I made it! You’re gonna feel a sense of accomplishment at the end of it—[and I do] most days.

Charlotte: I think I have a lot more confidence in my abilities than I did before at the end of the program and I think that it really prepped me for a lot more than I thought it would. So I just think the confidence piece has been really great to feel a little more comfortable in my own skin as a social worker.

This confidence comes about by going through some of the earlier adversities of finding their way and struggling to figure out what they should do and who they are as a social worker. Confidence is something that emerges as a result of actions taken and lessons learned over time and does not just happen solely with the passage of time. As Lucy says, there is some “suffering” that has to be overcome.

Finding their voice is a significant rite of passage for these new professionals, and an important part of gaining confidence. The feeling of being able to have input into the job is very powerful. Myra talked about how she made a suggestion for a program that got implemented and she felt very good about being able to make a difference. Marli began starting new groups for school kids, and felt proud of her innovation. At about the 16 month mark, Lucy began to trust her instincts and her supervisor encouraged her growing competence by telling her that she was really “getting it.” Hannah found her voice after being at her agency for almost a year and seeing very dysfunctional communication patterns. She talks about how she became very assertive and spoke out at work. She said, “... once it happened I can’t go back into my shell now! I’m out, I’m gonna tell you how it is!” She began to ask people, “Why are we doing that?” to see if things could be changed. It ultimately led to her being more discontent with the state of affairs, but she found another job where she felt better about the communication within

the agency. Darcy talked about her growing ability to speak up in staff meetings and ask for help, and not worrying that she was exposing her ignorance. Lucy talked about the journey and that it has taken her more than a year to find her voice as a social worker. She is not afraid to challenge other professionals about their ideas and give her opinions, which she sees as being informed and valid. Gina also had to stand up to difficult parents and clients and find her own voice. She says, “I have learned that you cannot be a pushover because there are clients out there that will take advantage of you and will treat you as their punching bag if you don’t stand up for yourself.”

Laura talked about having to create a reputation for herself in a health care setting. “I have to demand power if I want to have a certain say-so in things. You have to do that in order to be known, to be respected...” She said that she had to become more assertive with other professionals on the interdisciplinary team and market her skills to them in order to be included. Her advice for other social workers about how to assert themselves with a team is about asking questions versus being too forceful.

Laura: Encourage people to be that person, when you have somebody who’s talking to you about something that you don’t agree with, I’m not saying that everybody needs to stand up and say I don’t agree with you, but don’t agree with them –don’t shake your head in agreement just because you don’t want a confrontation. Offer a different perspective in the way that—we’re the best people at being able to do that. Using “I wonder_____” I wonder if that patient is doing this because they’re afraid to die or whatever it is.

Wendy also agreed that working in a health care setting and dealing with other team members, especially doctors, requires finding your voice in a politically correct way. She says, “I had to learn how to tread lightly enough that I wasn’t going to offend anybody, but be confident enough that I didn’t look stupid.” Paula also says that we social workers tend to “undermine our own intelligence and our own capabilities”

especially around other disciplines, and that we need to have more confidence in what we know.

The paths of all of the participants are constantly evolving as they discover what seems like the best fit for them. Greta says, “I’m on a path to figuring out what’s going to really feel fulfilling and what’s going to really going to jive with how I’m made and what I’m really good at and things like that.” Olivia left a job and struggled to find a fit for her second job, and ended up working part-time in a non-social work job along with working at a community mental health center with people with severe mental illness. “I believe your life takes you down the path you’re destined to go to and I guess this is where I’m supposed to be, whatever it is.”

Wanting new challenges. Many of the graduates reflected on what they wanted to do in the future. Several of them decided they would like to discontinue providing direct service and to pursue something else. This change of focus was a surprise as becoming a therapist had been a goal for many of them. Greta talked about her shift from providing clinical work to thinking about working in a macro practice job.

Greta: ...because I was under the impression that if you love people, you can hang out with people all day long, but after maybe four or five in a day....it just felt like such a chore and it still does to be honest.

Wendy also acknowledged getting a bit bored with direct service and was already thinking about what her next challenge might look like. Felicia began engaging in doing research on the side in order to keep herself engaged in something creative. Charlotte echoed the same thing about changing her focus:

Charlotte: And I think I went into the program thinking therapy—this is my thing and this is gonna be it and I don’t think it’s my thing anymore. I like it, I just don’t like it full-time. I get burned out and that’s ok—I don’t think private practice full-time is in the cards for me at all. Academia

maybe is and the things that I love about supervising I think relate well to academia and nerdy stuff that I just love.

Gina also says that she is doing case management now, and is enjoying the nurturing environment after her prior traumatic experience, but she can already tell that she will get bored with the pace of it and wants more intensity.

Several graduates also talked about wanting to obtain additional education beyond their MSW. Wendy would like to explore another Masters in health administration. Greta is contemplating a PhD in sociology as a way to focus more on social policy and social justice. Felicia is working on applying to PhD programs in psychology. Both Myra and Charlotte are interested in pursuing a PhD in social work at some point in the future. A few others expressed some interest in thinking about going back to school, but with no immediate plans. It is interesting that so many of the participants expressed an interest in continuing their education, but that may have been what drew them to being a part of this study.

Summary of Findings

This study set out to find out if there was a common process that new MSW professionals experienced in their first 18 months of work. After coding and deconstructing the data, several constructs emerged that taken together, illuminated a conceptual process model which shows the transition process for new MSWs in the workforce. Like any learning curve in life in which we go from one place to another, there are stages of transition and places of acute change and growth. I named this model *Riding the Waves* because it fit the process of learning something new and also conveyed how scary that can be. Interestingly, one of the graduates in the study, Lucy, talked about how her supervisor conceptualized her learning curve on the job with this same metaphor.

The metaphor seems to fit the process because there is an element of fear of drowning, struggle, danger, and triumph in learning to swim and also in navigating your first job experiences. This model of transition consists of five stages: Testing the Waters, Jumping In, Sinking or Swimming, Treading Water, and Riding the Waves. Each stage consists of several components which constitute the issues that new professionals may have to negotiate at each stage. And each stage comes with a question which needs to be answered by the social work professionals:

1. Testing the Waters: “Am I going to be a legitimate MSW? “
2. Jumping In: “How do I figure out what I am supposed to do in this job?”
3. Sinking or Swimming: “Can I really make it in this job?”
4. Treading Water: “How can I keep my balance and stay afloat?”
5. Riding the Waves: “What do I need to do to continue to grow and flourish in my career?”

Critical junctures. At each stage of the model, there are critical issues that could potentially make or break the new graduates’ journey. The goal of this model is to show places where new graduates could be additionally encouraged or supported in their journey in some of these difficult spots. Perhaps the most critical juncture in the journey for the new graduates is at the Sinking or Swimming stage where they have to deal with some crucial issues that could either help or hinder their continued growth through the phases. All of the stages are critical for growth; however, there are several issues that seem to be crucial according to the new graduates: adequate preparation from school, orientation, supervision, and self-care and job satisfaction. This model presents many opportunities for educators and employers to better support the new graduates so that

they do not make poor decisions, have poor boundaries, or experience compassion fatigue and burnout that will keep them from being effective with clients or cause them to leave the field altogether. The discussion chapter will explore more of the issues raised by the findings about the transition of new graduates, and look at how others can help new graduates with the five questions raised by each stage.

Chapter Five: Discussion

This chapter will present a discussion of the findings, implications for practice, recommendations for future research, and a conclusion. This study focused on the transition process for new MSW graduates in their first year of work by addressing the following research questions: (1) What is the process of transition from student to employee like for new MSW graduates? (2) What are the factors that influence this transition during the first 18 months for new MSW graduates? and (3) Are there critical junctures in the processes of transitioning from being a student through the first 18 months of MSW employment that are related to satisfaction and/or professional growth? For this discussion section, I will focus on exploring and expanding the conceptual stages of my model, as well as significant issues around the concept of transition. Next, implications for social work education, employers and students will be discussed. Recommendations for action and further research will be proposed. The study will close with a summary of conclusions.

Discussion of Findings

Each of the stages of transition identified in this model has unique aspects and complexities for further discussion. This section will focus on several significant factors mentioned in each stage of the model and integrate literature to compare and contrast the findings of this study with others. The stages of the model proposed in this study are Testing the waters, Jumping in, Sinking or swimming, Treading water, and Riding the waves.

Testing the waters. In this stage, the new graduates work on getting hired, take the licensure exam, and deal with the negotiation or acceptance of a salary. There is no

literature in social work about the process of finding a job, and this study does not shed light on that particular process, except to underline that often graduates must take any job available in order to survive financially. Average student loan debt for undergraduates in Indiana was reported as \$17,764, which was much lower than in other states (NASW, 2004). The average MSW educational debt was \$26,478, according to CSWE statistics (Yoon, 2012). Yoon (2012) also reports that credit cards were used to finance educational expenses by almost 30% of participants in his study of 260 social work graduates. The pressures of student loan and credit card debt can be significant for social workers, and could even mean that they cannot afford to support themselves at some point. The study by Yoon (2012) also indicated that social workers have higher debt burden than their counterparts in other disciplines, such as humanities, education and science. Social workers may not have the luxury of selecting a job that is a good fit, provides quality supervision or even good benefits. They may have to take the first job that comes along in order to ensure that they are employed, or what I have termed as a panic job. Or, they may feel pressure to take a job that pays better even if it is not something that they are particularly interested in doing in order to pay back student loans.

Salary. Salary is a significant issue in social work as shown in the NASW's survey of licensed social workers in which three-fourths said that salary would influence a job change (Whitaker et al., 2006). Frequently social workers joke about money and say that if they wanted money, they would not be in this field, but it appeared to be a significant issue for new graduates as they felt that getting less money than they thought was highly disappointing. Wermeling (2013) found that 92% of social workers said that earning an above-average salary was extremely to somewhat important, and salary has

been found to be important in retaining social workers in the field (Schweitzer, Chianello, & Kothari, 2013). The “line of satisfaction” that I saw in my study is also consistent with the mean income of social workers in the Wermeling study, which was about \$35,000-\$40,000. For social workers to earn above-average salaries, they would need to be above that mark. Social workers in this research project who said that they were satisfied with salary made \$40,000 or higher. Many social workers feel that it is difficult to live on what they make without a second job. As Charlotte relates, “I don’t know very many people that don’t work a second job that work for (her current agency) that are clinicians. Probably, I would say, about 67% have a second job.” Clearly salary is not insignificant for social workers, and is a primary consideration for most of them when selecting a first job. They may even put up with issues that they do not like in order to feel satisfied about getting more money. Salary satisfaction is a big issue for the profession, and one which continues to be discussed in terms of opportunities for advocacy.

Professional licensure. Licensure played a role in which jobs social work students could get as there is a time delay in obtaining the license that makes it impossible to have some jobs, such as in health care, lined up before graduation. All 50 states regulate social work practice and in particular, regulate several levels of licensure (Association of Social Work Boards, 2013). Licensure exams are considerably anxiety-provoking for new graduates, and new graduates can potentially fail the exam multiple times. The Association of Social Work Boards (ASWB) reports a pass rate of 82.1% for the LSW exam for Master’s students (Association of Social Work Boards, 2014). The exams cost a considerable amount of money as well (\$230), which is also prohibitive for new graduates already in debt. Several recent posts on a social work message board at

the job site *Indeed.com* evidenced multiple social workers having difficulty passing the exam and the anxiety and job restrictions that posed. This was a significant source of stress for new graduates and impacted their job search significantly as it eliminated some areas for work since they required a license before beginning the position.

Licensure also is an issue for new social workers as they may want to stay in a job that provides supervision towards their LCSW, even if they do not like the position. Supervision is only required for those social workers who want to pursue their clinical license, which in Indiana is known as the Licensed Clinical Social Worker (LCSW) credential. Indiana applicants who want a clinical level of licensure must have one hour of weekly clinical supervision from an LCSW for two years before being eligible to take the exam (Behavioral Health and Human Services Licensing Board, 2013). This level of licensure mandates some supervision on the job, although in many places of employment, an LCSW is not required for practice, and it is unknown if those social workers who only obtain the Licensed Social Worker (LSW) obtain supervision at all. While supervision is a licensure requirement, the content of that supervision is not specified, only the amount of hours which must accrue. While this is a significant help to new graduates, the quality of supervision could vary widely, as will be discussed later. Licensure definitely has an impact on the timing of getting a first job, the type of jobs available, and the expected duration of keeping the job due to needing supervision for the clinical exam.

These three issues combined--getting hired, negotiating a salary, and licensure--impact the type of job a new graduate will get, and impacts how they start their MSW career. If their first job is less than satisfactory, it can result in a rough beginning that could impact their career trajectory.

Jumping in. This second stage is about new social workers beginning their jobs, and includes orientation, whether or not they feel adequately prepared from school to practice, and their feelings about the reality of the job versus their expectation. All three of these themes are very important to new MSWs as they comprise the beginning experience of being new. If not negotiated well, those issues can bring up considerable emotional turmoil and professional insecurity.

Orientation. The experience of orientation for new graduates in this study was all over the map with some getting a thorough introduction and others simply getting thrown in the deep end to figure it out on their own. For Rachel, it was “a bumpy ride” and she was quickly thrust into seeking her own information about what to do since the agency was understaffed and no one had time to really orient her. In contrast, at Hannah’s second job, she got a month-long orientation involving classroom training on documentation and support on home visits. She describes her orientation as “awesome.” The norm for the majority of graduates in this study was that they had a short time to get the lay of the land, usually not exceeding a week or two, and then were expected to function as a regular employee. The quality of this orientation starts new graduates off in their first job, and is crucial for a good beginning in their careers.

There have been some studies about the orientation of new social workers, but not here in the U.S. Bradley (2008) looked at the experience of induction (orientation and beginning training in the U.K.) of 13 new social work undergraduates and reported that half of them were uncertain about the quality of their induction, mostly due to spotty supervision. Another evaluation of the induction for newly qualified social workers in the U.K. (Bates et al., 2010) found that while the initial orientation information about the

agency was helpful, very few social workers in their study were given any kind of structured process to transition into their new role and were largely on their own to determine their own learning needs.

How long is the ideal orientation and what does it consist of? These questions have not been explored in social work, but the word orientation certainly can mean a wide variety of things from a brief introduction to agency policy and co-workers, to an extended period of time in which there is a designated supervisor who ensures that the new employee's learning needs are met and that they feel confident and competent as they progress over time. By far, the norm in this study is much closer to the brief experience.

Ideally, there should be a special induction protocol or orientation for those that are not just new to the job, but are also new to the profession. Since 2006 in Northern Ireland, new social workers must satisfactorily complete an Assessed Year in Employment as a part of their registration (licensing) requirements (Wilson, 2013). The aim of this first year of employment is to provide protected caseloads and additional supervision and training to help these new social workers successfully make the transition from student to employee. Reviews of this program have shown that it has been helpful in the learning and development of new staff (Wilson, 2013). Hussein et al. (2014) found that a supportive orientation was a big predictor of job satisfaction for new social work graduates. This requires a structured organizational commitment to the development of new professionals.

Do agencies make special provisions for social workers who are new to the profession, or do all employees, regardless of years in the field, get the same agency

orientation? Having a special orientation just for new graduates would be a novel concept here in the U.S. as we tend not think about the special needs of new graduates. Perhaps this is because they are not a monolithic group and have varying levels of experience, as well as the fact that they work in a wide variety of jobs, including those that do not have social work supervisors to implement such a program. Agencies willing to take on new graduates would need to be thoughtful about the way in which they orient, supervise and support these new graduates over an extended period of time. And they would have to be willing to support a protected caseload, which would not increase until the new graduate had a greater comfort level with the work, not based on the needs of the agency unilaterally. This is an up-front commitment of money and resources, which may be prohibitive for many agencies.

No information was found about any kind of suggested orientation process for new social workers in the U.S. as it varies by agency. There are no professional standards required by the National Association of Social Workers either about the unique needs of new graduates and the obligations of agencies to support them. Other professions do recognize the importance of this beginning phase for their new graduates. A program for new probation officers includes a supportive supervisor who provided ongoing education and training, supportive peers and colleagues as mentors, and a protected caseload in recognition of the learning curve required to become proficient in the new job (Gregory, 2007). In nursing, there is considerable literature about the importance of a formal and extended orientation process for new nurses and how it increases their ability to adapt to the new work environment and increases their job satisfaction and retention (Ashton, 2015; Evans, Boxer, & Sanber, 2008; Rush, Adamack,

Gordon, Lilly, & Janke, 2013; Scott et al., 2008). Casey et al. (2004) argue for an extended orientation period as new nurses do not feel skilled, comfortable and competent for at least a year. Keasler (2013) discussed the success of a nurse residency program in the U.S. that formally supports new nurses throughout their first year of employment. This conceptualization of an orientation process extended over a year would be a very new concept to social work as formal orientation is conceptualized as a much shorter process. In the field of education, 47 states have a structured mentoring program for new teachers which helps them through their first year (Marable & Raimondi, 2007). Other disciplines have given some thought to the career beginning of their new graduates much more so than social work.

Currently, there is not one policy, program, or organization that is responsible for the orientation, support and supervision of new social work graduates. This concept of a specific orientation program for new social workers must be examined and there needs to be some recognition of the special needs of new MSWs, and specific policies, programs, supervisors and protocols to enable them to be successful. This will be addressed further in the implications and recommendations section.

Preparedness. What does it mean to be prepared for practice? Preparedness is a concept which can be conceptualized as whether or not new professionals feel prepared for the reality of their role as employees (Moriarty et al., 2011). It can also be conceptualized as to whether or not graduates are able to move seamlessly into practice (Wolff, Pesue, & Regan, 2010). There are no studies that define competence in the workplace, and none that specifically look at whether or not new MSWs felt prepared for practice, but the sparse evidence suggests that students do experience a disconnect

between their school experience and that of the actual workplace (Agllias, 2010; Bates et al., 2010). Are new MSW graduates prepared by their university for the realities of practice? This is a difficult concept to tease out. In many ways, no new graduates are ever truly prepared for all of the knowledge and skills they need for their first position, as clients and communities are complex and dynamic. As Lucy says,

There was a lot of stuff—being in the first year, you can’t learn in school—you just kinda learn from being on the job. You can’t teach us how to write a monthly report or incident report in school. It just doesn’t make sense.

However, graduates should have some basic knowledge about systems, theory, and practice. Experiences from the practica should also make the transition to work less bumpy. In this study, some new graduates felt prepared, while others did not. They tended to feel more unprepared about community resources and providing therapy to clients. If new graduates are not ready for practice, more seasoned employees may be hired in lieu of the new graduates, thereby restricting their already limited pool of first jobs. Gardner and Shulman (2005) say that one of the characteristics of a profession is there is often a conflict between what academia teaches and the reality of the profession. How that profession works to reconcile this conflict and establish practice standards is of critical importance. In social work, this divide has not been well-researched, although Agllias (2010) noted that field placements may not really prepare social work students for the reality of the workplace. Wermeling, Hunn and McLendon (2013) found that social workers who did leave the profession were more likely to be discontent with the quality of their education, although there is a need for much more research to explore all of the issues involved. It is the goal of schools of social work to prepare graduates for practice and give them the tools and experience that they need to be successful. Field education is

heralded as the signature pedagogy of social work education (CSWE, 2008). However, despite all of this preparation, there will be surprises. Schools of social work need to explore in what areas graduates are least prepared and work to bridge any gaps.

Expectations versus the reality of practice. Often social workers have some idea about what they think their first jobs will be like. Classroom knowledge, practicum experience, and prior work or volunteer experiences are meant to prepare students for what the real world is like so that they can transition seamlessly into work. When expectations and reality clash, it can be disconcerting. In nursing, this clash has been called reality shock (Kramer, 1974). In social work there is some very limited documentation of a reality shock phenomenon in terms of students experiencing a disconnect between their expectations and reality. Bates et al. (2010) called the first year experience of social work undergraduates in the U.K. a “baptism of fire” and Jack and Donnellan (2010) have cited a reality shock phenomenon occurring among new social work undergraduates in child welfare in the U.K. Does social work make explicit the fact that what new MSWs experience in school could be very different from the workplace, and do we prepare our graduates accordingly? This is a common experience and yet it may not be mentioned in school. In this study, Greta says that things in her first job were “not as by the book as I would have expected everything to look... [not] as black and white like when I was in school.” My study did show there were definitely places where the participants experienced at least some reality shock—lack of orientation, not feeling prepared for certain jobs, and being surprised about how much the emotions of the job impacted them quickly and intensely. In some cases, this did result in participants leaving their jobs to find a better fit. One of the factors that may be important in

lessening the experience of some of the reality shock is the practical preparation in school for what the real world of social work actually involved. Tham and Lynch (2014) report that social work students who were employed 18 months wished that that school had given them more real-world preparation, including practice skills and contact with real practitioners beyond the practicum experience. While it is unknown if more real-world preparation would lessen the shock of reality, it is certainly one of many possible ways to address the issue and make the transition a bit smoother.

In nursing, the concept of reality shock has been widely documented to describe the experience nurses have when encountering the real professional world as compared to the sheltered experience they had as students (Duchscher, 2009; Kramer et al., 2011). Duchscher (2009) speaks about a period of intense transition shock in which new nursing graduates are “moving from the known role of a student to the relatively less familiar role of professionally practicing nurse” (p. 1103). Duchscher (2009) says that nurses were ill-prepared for the tumultuous nature of the transition. One participant in the above nursing study said transition shock felt “like I just jumped into the deep end of the pool” (p. 1105). In education, a similar reality shock phenomenon is noted for new teachers with teachers feeling overwhelmed, exhausted, and experiencing some burnout (Dicke, Elling, Schmeck, & Leutner, 2015). Preparation for this disconcerting feeling would be helpful, and in the field of nursing, considerable literature argues for advanced preparation about what the transition from student to professional may look and feel like for new graduates. There are several new nurse survival guides on the market to help with the transition. In fact, a search on Amazon.com yielded at least eight books for brand new nurses to better cope with the transition from student to working nurse. One notable book is written by

Duchscher (2012) who details the transition process for new nurses including normalizing anxious feelings, common issues encountered early in the job, and how to avoid potential difficulties. The only book found on Amazon for social workers is specific to child welfare undergraduates in the U.K. (Donnellan & Jack, 2014) entitled: *The Survival Guide for Newly Qualified Social Workers: Hitting the Ground Running*.

What should students look for in a good first social work job? This is another place where more research would help social work educators prepare students by talking about how to size up a first job and a supervisor, and talk about workplace characteristics that might be more prone to be supportive and therefore engender less reality shock. Jack and Donnellan (2010) surveyed new bachelor's social workers in child welfare in the U.K. and found several contributors to reality shock -- high workload, coping with stress and emotions, and spotty supervision, among others. Overall the social workers in the above study did not feel that their employers appreciated them or cared about their well-being as human beings.

Reality shock can also be a pathway to growth if new social workers are given the proper support along the journey. Bradley (2008) talked about the liminality of the transition from student to professional, a concept that looks at the in-between-ness of no longer being a student and not yet being a competent professional. She describes this place as having high ambiguity which can create feelings of uncertainty and vulnerability. Hurlock et al. (2008) used a phenomenological lens in examining a social worker's practicum experience involving conflict. This conflict between the ideal and reality is an example of how moments of liminality invite and perhaps demand examining previously held beliefs, experiencing some disillusionment, but ultimately

coming to new understandings. The authors framed transitions as transformations involving searching for meaning and new understandings. Reality shock is not the end of the story, but can be the beginning of how social workers continue to construct meaning. This could also be a way to frame transitions to students so that they have an understanding of how their concepts of social work practice will be tested and challenged, and that this is a healthy part of professional development. Again, preparation for this experience would help to make it normative instead of surprising or traumatic. And new social workers need supportive supervisors or mentors that can assist them through this process and provide the reframing of their experiences.

Sinking or swimming. Several themes were a part of this stage of the transition journey, all of them involving intense emotions and potentially difficult situations: 1) How these new graduates negotiate not knowing, 2) getting (or not getting) quality supervision, 3) dealing with intense emotions, 4) experiencing dangerous situations, and 5) leaving, or contemplating leaving, a job. Any of these situations could rock the boat for a new graduate, or they could also be instrumental in helping them grow and flourish. Each of these themes is also emotional in nature, and speaks to the intensity of this stage of the journey for the new graduate.

Not knowing. There are understandably gaps between what was learned and experienced in school and what a new graduate needs to know when they are beginning to work. Perhaps the biggest surprise for many graduates is the amount of work that they needed to do on their own to bridge this gap. Cara talks about the discomfort of not knowing and her responsibility in getting up to speed:

And I think that was what was uncomfortable for me... I am no longer an intern, and I still have to learn, and whether or not I take extra time out of my day, or research at night, I need to know it, my license is on the line.

Knowing how much you do not know can be a stressful experience for new graduates. It can be tempting to simply pretend that you know when you do not, but that can bring about a feeling of having to hide or being a phony. This can be equated to the imposter syndrome, which is worrying that you will be found out by others to be incompetent (Neal McGregor, Gee, & Posey, 2008). The experience of not knowing was linked to heightened emotional responses and can be difficult to manage. Several of the participants used the word “humbling” to describe their feelings of understanding how much they did not know. Greta called her experience of being new “my humiliating reality check.” These feelings are certainly understandable, but come as a surprise to the new graduate and are a part of the reality shock phenomenon as the gap between the actual and the expected was surprisingly huge for them. Many of them decided at some point to just come clean and talk about how much they did not know and ask for help, but again, this took some humbleness and courage on their parts. The reluctance to open up and share that you do not know something is also common in nursing (Smith, 2007). While it is not a surprise to anyone who has been in a professional field for any length of time, it is often a surprise to new graduates about how much learning they need to do on their own to get what they need to be competent.

The vast majority of participants talked about actively seeking out ways in which to fill the knowledge gap they experienced, such as going to the library, buying books, and searching the internet (“Googling”) to get needed information in order to look competent. New graduates must often teach themselves what they need to know on the

sly so as not to be exposed at work as not knowing enough. Helping new graduates understand that is a normal and expected process might be anxiety-reducing and encourage them to ask questions and seek help. Not knowing requires considerable reflection and a willingness to be vulnerable, and requires a supportive guide to elicit questions about knowledge and experience gaps.

Supervision. While it is the responsibility of schools of social work to prepare their graduates for practice, it is then the responsibility of the new workplace to provide the environment for these new MSWs to continue to learn and grow. When social workers get thrown into the deep end of the pool in order to learn how to swim, there has to be a lifeguard there to help when there is trouble. Supervisors should be the lifeguards or the life-savers for new social workers. However, as this study demonstrates, the quality of supervision can vary greatly depending on many factors. Research has shown that effective supervision can help social workers cope with the stress of working in social service organizations (MorBarak, Nissly, & Levin, 2001), reduces turnover, and compassion fatigue (Merriman, 2015) and contributes to job satisfaction and organizational commitment (Abu-Bader, 2000; Chiller & Crisp, 2012; Reamer, 2003). The quality of the supervisory relationship is a big predictor of job satisfaction (Smith & Shields, 2013).

What are the reasons that social workers get little or poor supervision? While an exhaustive discussion of supervision is beyond the scope of this study, several reasons emerged from the participants that were noteworthy. Some graduates only received group supervision, such as Felicia who says she “never [has] one-on-one time.” Myra found her supervisor to be too busy to talk to her. Willow (in case management now) and

Kellie (school social work) do not receive any formal supervision as they are not going to pursue an LCSW, although it is surprising that any new professional would not need some type of supervision. As some graduates experienced in this study, they were in the position where they did not have a qualified supervisor at their job and had to find a person outside of their agency, even if it means they had to pay them for the supervision (Curtis et al., 2010a). This is most common in the health care field where the supervisors may be from other disciplines. In a large study of supervision in Canada, Hair (2013) found that approximately 36% of social workers were supervised by a wide variety of other disciplines. In health care social work, supervision is often determined by the organization's culture and values, and often becomes more about administrative issues than about the growth and development of the individual social worker (Kadushin, Berger, Gilbert, & de St. Aubin, 2009; Noble & Irwin, 2009).

Funding pressures and administrative management changes have put clinical social work supervision at risk (Kapoulitsas & Corcoran, 2015). Supervision has long been relied on in social work as the primary way social workers achieve personal and professional development, but this model has been changing and access to supervision is diminishing (Beddoe, 2010) and often functions more to monitor performance (Beddoe, 2010; Kapoulitsas & Corcoran, 2015). As Beddoe (2010) notes, a reflective space is critical to effective practice. When supervision becomes more about surveillance and less about growth, then new social workers will not have the space that they need to grow and develop.

Intense emotions. Social workers in this job experienced many emotions all along the journey of their first 18 months, and expressed considerable anxiety, fear,

feelings of being overwhelmed, and feelings of being very responsible. Lucy says she was “just so scared about screwing something up.” These intense emotions seem to be expected for new graduates, yet we do not often prepare them for this experience.

Nursing literature has documented the intense feelings that new nurses often experience. Duchscher (2009) developed a model of transition shock to represent new nurses’ first one to four months on the job. She noted the intensity of their feelings as new nurses used words such as ‘terrified’ and ‘scared to death’ to talk about their pervasive feelings of anxiety, and they even used the word ‘drowning’ to describe how overwhelmed they felt, which was also mentioned by the social work participants. Duchscher (2009) mentions four emotional components of transition shock as hallmarks of the phenomenon: loss, disorientation, confusion and doubt. New graduate nurses expressed several fears during this initial period in their jobs: 1) being ‘exposed’ as clinically incompetent, 2) failing to provide safe care to their patients and inadvertently hurting them and 3) not being able to cope with their designated roles and responsibilities (p. 1107). Nursing literature contains many examples of new graduates experiencing heightened emotions (Scott et al., 2008). If new professionals were prepared for the feelings that go along with being new, and had a more supported orientation experience, they may be able to process these feelings and grow from them.

Both new nurses and new MSWs experience many emotions as they acclimate to their first job. Learning anything new can be stressful, but coupled with the complexity of real-life client situations and feeling very aware of being new seems to intensify the emotional experience. More research should explore the degree, types, and intensity of

emotions that new social workers experience, and how those emotions affect their practice.

Dangerous situations. Social workers also experienced considerable feelings of vulnerability and even fear when it came to dealing with clients in dicey situations. As Myra said, “I’ve been in houses where things have happened, like that lady who was sitting on the front porch, she was a grandma, and she got shot. I go to that area and that happened right in the middle of the day.” This fear or worry adds to the emotionally loaded territory that new graduates already have to navigate. In a survey of 1,129 social workers by Newhill (Saturno, 2015), 58% of the respondents said they had experienced an incident of client violence. None of the participants in this dissertation study mentioned any training they had for dealing with difficult situations, although that may certainly have occurred. It is unknown how much they were prepared for these situations, but the intensity of emotions that these situations evoked was extremely high.

As there is not much documentation of the impact of potential or actual workplace violence (violence that occurs on the job by clients) in the social work field, nursing literature does offer some information. Howerton Child and Mentes (2010) discuss the accepted attitude that workplace violence is just part of the job for nurses and is to be expected. Nurses do not often report incidents of violence because they feel that they will be “viewed as incompetent, having provoked the incident or as trouble- makers” (p. 91). The incidence of violence in the workplace for nurses in a 12 month period was 63.8% for verbal abuse, 41.6% for threats of violence, 22.3% for physical violence, 19.7% for sexual harassment, and 9.7% for bullying (Park, Cho, & Hong, 2014). These are significant numbers, and the incidences of violence for social workers are unknown.

Leaving a job. A significant finding is that *a* majority of the participants, 17 out of 27, had more than one job in their first 18 months of post-MSW employment. As was discussed in the findings, there were many reasons for leaving a position including poor fit, poor supervision, and high caseloads. In a study of social work turnover, Lambert, Cluse-Tolar, Pasupuleti, Prior, and Allen (2012) found that many factors were correlated with intent to leave a job, notably dissatisfaction with pay and benefits, and lack of organizational commitment.

Turnover for new graduate nurses has been reported to be between seven and 18% in the first year (Kovner, Brewer, Fatehi, & Jun, 2014; Takase, Nakayoshi, & Teraoka, 2012). For teachers, job mobility is twice as high during the first two years of teaching than it is for teachers who have been in the field longer than ten years (Hanushek & Rivkin, 2007). Turnover is expensive for employers as well as impacting service to patients and clients. In nursing, Ulrich et al. (2010) cited studies showing that nursing turnover can cost an organization \$82-88,000 per nurse. There does not appear to be much research about social work turnover for new graduates in comparison to education and nursing, and a further exploration could be helpful in determining why social workers leave and why they stay. The findings from this study do not appear to be uncommon in comparison to other professionals as job mobility seems to be the norm.

All of the above factors in this stage—not knowing, dealing with intense emotions, dangerous situations, and possibly leaving a job- all make this stage difficult for the new professionals. If any of these stages were not negotiated successfully, it could result in the new social worker leaving the field or experiencing some significant difficulty on the job, which could impact their future career.

Treading water. The third stage of the model talks about social workers finding a balance between stressors and satisfiers and being able to stay afloat. The most important issues that new social workers have to balance are compassion fatigue and burnout, self-care, and job and compassion satisfaction. Each will be addressed below.

Compassion fatigue and burnout. The majority of social workers in this study experienced some type of compassion fatigue or burnout and thus it is important to delve deeper into these constructs. Compassion fatigue is viewed as a “response of personal distress experienced by some people when exposed to the suffering of others” (Thomas, 2013, p. 375). It can also be described as an “emotional, physical, and spiritual exhaustion from witnessing and absorbing the problems and suffering of others” (Hunsaker et al., 2015, p. 187). Compassion fatigue can have a sudden onset and is a response to hearing difficult stories and can result in painful personal feelings (Beder, Postiglione, & Strolin-Goltzman, 2012). Burnout tends to develop over time and results in disengagement from the job in response to job stress. Burnout is defined as exhaustion from the demands of the workplace and can be attributed to environmental factors, such as high caseload or lack of support to deal with work-related stress (Hunsaker et al., 2015; Thomas et al., 2014). These constructs are often overlapping. The feelings are similar in that they create feelings of “helplessness, loneliness, anxiety and depression” (Beder et al., 2012, p. 666).

Compassion fatigue is a complex construct, and is akin to post traumatic stress disorder, but not as severe. People experiencing compassion fatigue experience a depletion of emotional resources as a result of being present with client pain and suffering, and feel responsible to alleviate this suffering (Merriman, 2015). Merriman

(2015) reports that novice counselors experience greater levels of compassion fatigue and that educators have a responsibility to forewarn students about the inherent risks of experiencing compassion fatigue and to discuss prevention efforts.

Siebert (2008) surveyed 751 social workers and found that that three-fourths reported having had an episode of burnout during their career with almost 40% reporting having burnout at the time of the study. Studies of burnout among mental health workers have found high levels of burnout and emotional exhaustion among providers (Paris & Hoge, 2010; Ray, Wong, White, & Heaslip, 2013). Burnout also leads to poor job performance, and reduced client satisfaction with services (Morse, Salyers, Rollins, Monroe-DeVita, & Pfahler, 2012). Lloyd, King and Chenoweth (2002) state that risk factors associated with burnout appear to include the following: “Lack of challenge on the job, low work autonomy, role ambiguity, difficulties in providing services to clients, and low professional self-esteem” (p. 263). Lencioni (2010a) identified three characteristics of miserable employees that are fairly universal: Feeling that no one cares that you are even there, not knowing if you are doing a good job or not, and believing that your work really does not matter much anyway. Ga-Young (2011) found that social workers with higher levels of burnout have more physical health complaints, specifically headaches, gastrointestinal problems, and respiratory infections. Social workers most at risk for burnout were those who were entry-level or newer in their careers. Han, Lee and Lee (2012) found that even entering MSW students already manifest some level of burnout due to prior work experience. The authors recommend education about burnout and self-care to be a part of the MSW curriculum if it is not already included.

Many social workers in this study talked about feeling either some compassion fatigue or burnout and this is significant in that they have not been in the field for very long. Preparation for the potential of either of these occurring is critical, as the experience is not at all uncommon (Smart et al., 2014). Prevention of these phenomena requires active support from supervisors, who are critical to helping new social workers reflect on their experiences. And in the event of these occurring anyway, intervention from a knowledgeable supervisor should help to mitigate the intensity.

Self-care. The majority of social workers in this study talked about their personal strategies for self-care, even if they admitted that they were not practicing them very effectively at that moment. Professional self-care can be defined as “the utilization of skills and strategies by social workers to maintain their own personal, familial, and spiritual needs while attending to the needs and demands of their clients” (Newell & Nelson-Gardell, 2014, p. 431). There are a variety of strategies for self-care and social work students should be educated about the risk and protective factors for compassion fatigue and burnout and encouraged to develop a self-care plan that involves physical, social and emotional strategies. Students with trauma backgrounds should be encouraged to seek counseling in order to deal with the stress of hearing client trauma stories as part of self-care (Newell & Nelson-Gardell, 2014; Salloum, Kondrat, Johnco, & Olson, 2015).

To continue the metaphor of the process model in this study, supervisors for new social workers should function as lifeguards and teach new graduates to swim and when or if they start to drown, throw them a floatation device in the form of active support strategies during supervision in order to help them continue to be able to work effectively with clients and not experience burnout or compassion fatigue. The students in this study

could have benefitted from this kind of active support. Very few social workers in this study mentioned that their supervisors talked with them about self-care, compassion fatigue, or burnout.

Job satisfaction. Since there are very few studies regarding the experience of new MSWs, one way to look at whether their journey into the world of work was successful is to look at job satisfaction as an indication of a successful transition from student to professional. Job satisfaction is a complex concept which could include many variables. Abu-Bader (2000) describes job satisfaction as a “function of the relationship between what individuals expect from their work and what they actually derive” (p. 191). Job satisfaction/dissatisfaction factors for nurses have been related to many issues, such as the amount of job stress, a sense of belonging resulting from supportive co-workers and team members, manageability of the caseload, whether or not there is conflict, respect from physicians, schedules, and the kind of orientation received (Anderson et al., 2009; Gardner, 1992; Halfer & Graf, 2006; McKenna & Newton, 2008; Scott et al., 2008).

When looking at social workers as a whole, and not just new graduates, there are many factors which have been shown to impact job satisfaction. Pay or wages is highly correlated with job satisfaction (Malherbe & Hendriks, 2004; Wermeling & Smith, 2009). Supervision is a critical factor and can serve to buffer social work employees from stressful job situations, provide ideas for managing job duties better, and provide emotional support for difficult situations (Mor Barak, Travis, Pyun, & Xie, 2009). Several supervisory functions are highly correlated with positive outcomes for employees: “task assistance, social and emotional support, and supervisory interpersonal

interaction” (Mor Barak et al., 2009, p. 3). Co-worker support was a significant predictor of job satisfaction in a study of nursing home social workers (Simons & Jankowski, 2008) and human service workers in a domestic violence shelter (Haley-Lock, 2007). Other studies have also talked about the importance of a supportive work environment for social workers (Haley-Lock, 2007; Kadushin & Kulys, 1995; Marriott, Sexont, & Staley, 1994; Neuman, 2003). Co-workers were mentioned in this dissertation study by the majority of new graduates as an important satisfier as well. Abu-Bader (2000) looked at four categories of factors that relate to job satisfaction among social workers: personal characteristics, such as age and gender; work conditions, such as workload and working conditions; work rewards, such as promotion and pay; and work relationships, such as supervision and connection to colleagues. These factors were examined for social workers regardless of years of work experience, but certainly have implications for new graduates as well.

Compassion satisfaction. Many of the participants in this study talked about feeling good about making a difference. As Carla said, “I like it [the job]. The clients are really thankful to have our help because it is working with disabilities, helping them get jobs and it is really rewarding for me.” Compassion satisfaction can be defined as positive feelings about effectively helping others (Stamm, 2005; Thomas, 2013). Resilience is an important concept for new social workers in that there are risk and protective factors for job satisfaction. In terms of compassion fatigue, these protective factors promote compassion satisfaction:

...access to social support, opportunities to process difficult or traumatic client stories, perceived ability to cope, internal locus of control, years of experience and education, amount of leisure time, specialized training in trauma work, use of evidence-based treatment strategies, access to clinical

supervision, type of professional experience and use of self-care strategies.
(de Figueiredo et al., 2014, p. 287)

Compassion satisfaction is a concept which should be discussed in supervision with new social workers as it can make a difference in their ability to weather the difficult moments in their jobs. Feeling like you are making a difference and your work has meaning can promote resilience and will help social workers ride the waves instead of being tossed about and becoming exhausted with the day-to-day grind.

Riding the waves. In this final stage, new graduates are feeling more sure of themselves. This growth comes as a result of working through many of the feelings and issues in the previous stages, finding ways to balance stress with self-care, and focusing on the good things that they like about their jobs. As Myra said,

I feel a lot more confident in what I do when I do a home visit and confident in being able to build rapport and assess the people I'm working with, and kinda have a more fluid working knowledge of, 'ok, this is what I'm hearing them say, but what I think they actually mean is this other thing,' and I feel like I've learned these questions to ask that ok, it opens one door, but what we really wanna do is get into that closet, so let's just get to that point.

Feeling confident and finding a voice. Increased feelings of confidence and competence with time were expressed by the vast majority of participants in this study. This growing confidence over time is consistent with models of new nurses and new teachers. Even though growing confidence does not equate to competence, it is hoped that the two are linked. While it is difficult to establish competence as that varies by setting, perceived confidence is something to which new graduates can speak. In nursing, Casey et al. (2004) report that it takes new nurses about a year to begin to feel confident. In nursing, a structured residency program can help new nurses build confidence gradually through the instrumental support of supervisors (Banks et al., 2011). While no

research in social work has defined the relationship between a good orientation and confidence, it would seem to follow that a good orientation and supervision would assist in developing confidence for new graduates. More research should address factors which enhance feelings of confidence in new social work graduates.

Wanting new challenges. Many new graduates in this study expressed that they were already thinking about new challenges and growth opportunities. Wanting new challenges, such as a promotion, a different job, or going back and getting another degree are a part of thinking about their future career. McKenna and Newton (2008) describe a phenomenon called moving on for new nurses who are 12–18 months out from graduation and talk about how the new nurses were looking at new specialties, and working to support others newer to the job. This moving on for social workers can be a driving force for them to pursue more education, specialized knowledge or different job challenges. It is also a sign that they are not so focused on struggling with some of the issues more evident in the earlier stages of transition.

Transitions from student to professional. As the focus of this research is on the transitional journey for new graduates, in this section I will look at models of transition for nursing and for education and how they compare to the process model developed in this study. While there are only a few studies in education, there are more than 50 articles in nursing about the transition from student to professional and several different models of how this transition works. Because there are so many studies, particularly in nursing, I will explore several of these models and then compare them to the model in this study (see Table 3). In nursing, several hallmark studies laid the groundwork for the study of new nurses in transition. Kramer (1974) discussed the concept of reality shock

and how new nurses are surprised and even disillusioned to see the discrepancy between the ideal and the actual reality of practice. Kramer discussed how the values and the certainty of the educational setting were very different from the reality of the workplace and this caused confusion and anxiety for new nurses. The stages for the new graduates were the honeymoon phase, disorientation and disillusionment, and then recovery and balance. This reality shock was often brought about by role conflict and feeling overwhelmed with responsibilities. It often brought about a crisis point for the new nurses, and caused them to question whether or not choosing nursing was a good decision for them, and whether or not they would survive in the job (Kramer, 1974). This reality shock phenomenon is echoed in many other nursing studies (Duchscher, 2008, 2009; Hatler, Stoffers, Kelly, Redding, & Carr, 2011; Kelly & Ahern, 2009; Kramer et al., 2011; Morrow, 2008) and expresses the collision with the reality of practice that makes nurses reconsider whether or not they can do the job. For social workers in this study, I did not see a dramatic reality shock phenomenon as discussed by Kramer (1974), although social workers spoke about the difficulty with not knowing and the intense emotions that went along with dealing with being new and with being responsible for clients and feeling emotional about client situations.

Perhaps the conceptual model with the biggest application to social work is Benner's (1984) discussion of the stages that new nurses progress through: novice, advanced beginner, competent, proficient, and expert. Her description of the novice role, described earlier in chapter two, appropriately described the feelings and behaviors of some of the inexperienced new graduates in this study. She talks about the clear, context-free rules of beginners and how they struggle to apply those to real life situations, which

of course are more complex and multi-factorial. Advanced beginner is often the stage in which social workers fit when they start their first job, depending upon their practicum and life experience. In this stage, they rely on others for help with complexity, they are able to apply more knowledge and begin to feel more like a nurse, instead of just acting like one. In this study, most of the social workers would be classified as advanced beginners as they are still learning, applying knowledge, seeking help when they are overwhelmed, dealing with emotions, but beginning to feel more comfortable in their role.

Other transition models. There are several qualitative studies in nursing which speak to the new nurse transition process. Duchscher (2008) has a stage model discussed earlier in the literature review which talks about three stages of doing, being and knowing in which graduates gradually become more acclimated to the environment and more confident. Feng and Tsai (2012) developed a model of new nurses' (less than six months in the workplace) socialization process and found their transition process to be harsh and difficult. They found three themes: overwhelming chaos, learning by doing, and being an insider. Being an insider meant that they finally felt they were beginning to be accepted by the team. Deppoliti (2008) found several passage points that new nurses experience: finding a niche, orientation, the conflict of caring, taking the licensure exam, becoming a charge nurse, and moving on. Adapting to stress and the importance of relationships were central to each of these passages. Mooney (2007) looked at the process of professional socialization for nurses and talked about how they worked hard to fit into the pre-existing culture and often had difficulty finding their own voice and questioning the status quo. In a phenomenological study, Kelly and Ahern (2009) identified several themes that

emerged such as reality shock, that nurses ‘eat their young’ and that they were thrown in at the deep end of the pool. New graduates were often unaware of nursing culture, and were surprised by cliques, ‘bitchiness’, and power relations in the hospital setting. McKenna and Newton (2008) also used phenomenology to study new nurses and found three main themes about how new nurses develop knowledge and skills: a sense of belonging, knowing and moving on. Participants felt included in the culture only after working for at least a year. It is apparent that nursing has long understood the importance of understanding the transition of new graduates.

Reality shock was also documented for new teachers. Education studies about new teachers talk about the trauma of the transition as well and how new teachers are often shocked by how different reality was than even their student teaching experiences (Fantilli & McDougall, 2009; Fry, 2007; Sabar, 2004). New teachers have an even higher attrition rate than nurses; approximately 40-50% of all novice teachers leave the field within five years (Maciejewski, 2007). Sabar (2004) discussed three stages that new teachers progress through in their transition journey: fantasy, reality and adjustment. During the reality stage, new teachers experienced a disconnect between their educational preparation and the reality of the job. New teachers in Sabar’s study had difficulty figuring out who to ask for help and how to do it, as asking for help made them feel vulnerable and would expose them as not knowing.

In this study, while social workers certainly had a confrontation with the reality of practice in terms of productivity, lack of supervision, and expectations that they should know things that they do not, they did not experience such a huge disconnect with the exception of a couple of participants. For ease of comparison, several theories or

conceptual models of new nurse transition will be compared to the findings from this study of new MSWs (Table 3).

Table 3: Comparison of selected nursing models of transition to this social work study

| Study/Model | Main points | Comparison to this study for new MSWs |
|---|---|---|
| Kramer (1974) Reality Shock phenomenon identified in new nurses | Reality shock –not being prepared for the realities of the workplace. The stages are honeymoon phase, disorientation and disillusionment, and then recovery and balance. | Some reality shock phenomenon, although not as dramatic. Elements of disorientation (not knowing), disillusionment (dealing with caseload, emotions, lack of supervision), and recovery and balance (finding their voice, self-care, job satisfaction) |
| Benner (1984) Benner, Tanner, and Chesla (2009) Dreyfus model–stages of nurse development over time: novice, advanced beginner, competent, proficient, expert. | New grads are initially mostly at the advanced beginner stage. Big concerns are trying to apply knowledge, deal with anxiety, and difficulty handling complexity. Many new grads are at the competent stage at the end of 18 months. They are dealing with self-care, increased practice wisdom and trying to handle compassion fatigue. | Considerable application to the social workers in this study. They definitely struggled with knowledge application and complexity in the beginning, but then moved into dealing more with emotions and finding their own practice wisdom in the competent stage. It would take more time and development to get to the proficient and expert levels and some may never reach those. |
| Duchscher (2009) Transition Shock Model. Looks at the first few months on the job for new nurses and the intense emotions that they experience. | Transition Shock is in the first 1-4 months of practice. New nurses' fears were primarily about being exposed as being incompetent, potentially hurting a patient, and not being able to perform their roles and responsibilities as expected. | New social workers worried about being exposed for not knowing things. Several worried about not having enough knowledge or practice experience to help their clients. The shock of the transition was not as evident, and study participant were not interviewed during that time period of their transition. |
| Duchscher Stages of Transition model (2008). Interviewed 14 graduates at various times in their first 18 months to develop a process model of transition | New graduate nurses progress through three stages during the first 12 months of practice: Doing, being and knowing. This process of becoming and finding one's way to a place of feeling more confident was dynamic and complex. Duchscher recommends extended time with protected workloads for new graduates to discover their professional selves. | While there are some similarities about emotional intensity, dealing with high caseload and feeling more confident later on, this model is more connected to nursing job descriptions. Recommendations for new nurses echo my own for extended orientation, and more supervision with reflection encouraged. |
| Feng and Tsai (2012) studied socialization process of new nurses | They found three themes: overwhelming chaos, learning by doing, and being an insider. Being an insider meant that they | Did not have discussion of about values clash in this study explicitly, although productivity |

| Study/Model | Main points | Comparison to this study for new MSWs |
|---|--|---|
| in Taiwan who were in their first job at about the 6 month mark on average | finally felt they were beginning to be accepted by the team. Also talked about values clash between organization needs and professional values. Recommended mentors for extended time. | standards were mentioned as a place where personal and professional values clashed. |
| Deppoliti (2008) interviewed nurses in the field less than 3 years and found several passage points that new nurses experience. | Passage points were: finding a niche, orientation, the conflict of caring, taking the licensure exam, becoming a charge nurse and moving on. Overriding themes were responsibility, learning and perfection. Adapting to stress and the importance of relationships were central to each of these passages. | Social workers in this study experienced some of these same transition points, such as orientation, licensure and the conflict of care (struggling with personal boundaries and self-care in the face of client problems). And both adapting to stress and relationships were of central importance to these graduates as well. New social workers did seem to experience a need to be perfect as did the nurses. |
| McKenna and Newton (2008) used phenomenology to study new nurses at various points in their first 18 months. | Six themes were identified: gliding through during school, surviving, beginning to understand, sheltering under the umbrella, knowing how to, and we've come a long way. The first year after graduation is tremendously stressful and new graduates have to learn to manage time, connect theory with practice and grapple with being socialized into the profession. | This study also identified that this time period could be stressful. New social workers are definitely dealing with being socialized into the profession if there is a social work presence where they work. They also experienced an increase in self-confidence |

In social work, we do not have such well-developed models of transition as does nursing. Research from other disciplines can be helpful, but there are critical differences between professions that may make the transition a very different process. While social workers are not in the position to administer treatments which could cure or kill, they can do great harm to clients by not accurately assessing their situation, making poor or wrong recommendations, having inappropriate boundaries which harm themselves or the clients, and even enabling clients and making them worse off than they were before they sought help and exacerbating their own personal wounds from life and becoming traumatized or harmed personally by the work that they do. This sense of responsibility to clients, to the

profession, and themselves in the face of the realities of the workplace, such as caseload, crises, and dealing with emotions can be overwhelming to new graduates.

According to Barretti (2004), the existing empirical literature on how social work students become professionals lacks depth and breadth in comparison to other health professions, and there are many unanswered questions about how social work students develop a professional identity which continues throughout their lives. “The socialization process that occurs after graduation includes experiences such as supervision, continuing education, relationships with key figures, self-reflection and a commitment to lifelong learning” (Miller, 2010, p. 930).

Implications

When thinking about the practice implications for new MSWs, several questions come to mind. How can we improve the transition experience of new MSW graduates? What are the critical points of prevention or intervention during their transition? A lack of understanding of the transition experience can lead to many problems for the social worker, the organization and its funders, and its clients. Each of the following four areas will be discussed in terms of implications: the new social worker, social work educators, employers, and ethical considerations.

Implications for new social workers. If new social workers are not adequately supported through at least the first year of the journey, many problems can surface in terms of the potential impact on the developing social worker and the clients that they serve. Some of these issues are: 1) the impact on quality client services, 2) retention of social workers in the field, and 3) using supervision as a way to promote growth and development and minimize transition difficulties

Quality client service. Poorly prepared new graduates who receive minimal or unhelpful supervision and are overwhelmed with the demands of the workplace are not going to be able to provide the best quality client services. In child welfare, high turnover can result in delayed placements and can negatively affect successful permanency placements (Strolin-Goltzman, Kollar, & Trinkle, 2010). Tham and Lynch (2014) conducted a study of children in foster care and found that the significance of the loss of a caseworker was comparable to that of re-experiencing the loss of their families. In mental health settings, social work turnover has been shown to impact the client-therapist relationship and subsequent therapeutic outcomes (Bliss, Gillespie, & Gongaware, 2010). Discussions about supporting new MSW social workers are ultimately about whether or not quality service is being provided to the clients that we serve. It is in the interest of schools of social work and employers to collaborate as they have done in the Title IV-E child welfare programs to support new employees and promote job satisfaction and retention (O'Donnell & Kirkner, 2009). It is also an ethical issue for our profession to not adequately support our new graduates in the provision of client services.

Retention. If new social workers are to stay in the profession, factors which promote retention must be examined. Workforce studies in social work are fairly limited. In a 2006 study for the NASW, Whitaker, Weismiller, Clark and Wilson (2006) found that 19% of licensed social workers in their extensive survey no longer practiced within the profession; this same percentage was confirmed by Jack and Donnellan (2010) in the U.K. Retention has been particularly challenging in child welfare and social service agencies, and turnover has been estimated at 30-60% per year (MorBarak et al., 2001). A

study in the U.K. found that social workers (not necessarily all MSWs) have a much shorter career than other health professionals, with the average being eight to thirteen years, as compared to 25 years for doctors and 15 for nurses (Curtis, Moriarty, & Netten, 2010).

There are several factors which have been shown to positively impact retention of social workers. Supervisory support and team support (Bercier & Maynard, 2015; Ga-Young, 2011) and professional development (Cohen & Gagin, 2005; Gregorian, 2005) are factors that contribute to social work retention. There are several supervisory characteristics which also contribute to retention: task assistance, social and emotional support, and supervisory interpersonal interaction. Effective supervision produces employees that feel positively about their jobs and the organization, all of which contribute to retention (MorBarak, Travis, Pyun, & Xie, 2009). Compassion satisfaction is also strongly influenced by supervisor support (Hunsaker et al., 2015). Other factors that bode well for retention are employees that garner a sense of satisfaction from their job, and those that have a strong sense of commitment to the organization or the population served (MorBarak et al., 2001).

Professional socialization and supervision: Keys to development. Professional socialization is a continuing journey (Miller, 2010). This socialization process is shaped by early life experiences, continues into formal school and throughout the professional career of the social worker. Miller (2010) focuses on how this process happens in schools of social work through their explicit and implicit curriculum, and primarily through field experiences, which are considered the signature pedagogy by the CSWE (2008). Miller (2010) posits that professional socialization consists of “four interrelated

elements: 1) knowledge and skills, 2) values, 3) attitudes, and 4) professional social work identity” (p. 933). Upon hire, new MSW employees begin to establish themselves on the job and continue the process of acculturation into the profession. Bates et al. (2010) state that:

Much of the learning required to develop professional competence and capability takes place after the completion of formal education, and aligns with the concept of professional development as ‘being’ rather than just ‘knowing’; it enables new staff to deal more effectively with the uncertainty and complexity of social work practice. (p. 155)

The importance of supervision was mentioned above as a factor in retention, but supervision itself is important in socialization into the profession (Egan, 2012) and for professional development (Chiller & Crisp, 2012). Supervision has historically been conceptualized as a one-to-one relationship with a mentor in which safe, professional learning is to take place which contributes to the development of the reflective practice for the social worker (Kapoulitsas & Corcoran, 2015). Supervision has been cited as having three functions: administration, education, and support (Kadushin & Harkness, 2002). However, according to Beddoe (2010), supervision has an essential conflict—is the goal to protect the agency from risk, or to promote the growth and development of social workers? Supervision can too often focus on bureaucratic goals, such as adherence to agency mandates, and not on developing the social worker’s ability to critically reflect on their professional judgment (Noble & Irwin, 2009). In Australia, many social workers receive both internal and external supervision in order to fulfill both functions of oversight and professional development (Beddoe, 2010; Curtis et al., 2010). Social work employees may have a mentor and a supervisor who share the dual management functions of monitoring performance and professional growth and development. In the

U.S., health care social workers can be particularly at risk for not getting the professional development piece of supervision as the organization itself drives whether or not social workers have the personnel and time to provide clinical supervision (Simon, Pryce, Roff, & Klemmack, 2005). Supervision is a critical piece in preventing compassion fatigue and burnout (Hunsaker et al., 2015), yet in an unpublished pilot study of 50 new MSW graduates, Larimer (2012) found that one-third were receiving no supervision at all.

Implications for social work educators and educational policy. Schools of social work seek to prepare their students to graduate and be able to meet the demands of the workplace. Part of this preparation should be helping students anticipate the real challenges of the workplace and being realistic about what to expect during their first year or two in the field.

One of the major findings from this study is that students did not know what to expect once they were on the job, and preparation about each of the stages that new social workers may experience would seem to be of critical importance to students making a smooth transition. In the field of nursing, there is much discussion about preparation for work to lessen reality shock (Duchscher, 2008) and many guides to help students navigate the journey. Also, if we know that some students may have a more difficult time with the emotional demands of social work, we should provide some assessment and assistance to those students. Social work educators have an ethical responsibility to teach self-care to students so that they may survive in the workplace (Newell & Nelson-Gardell, 2014). Harr and Moore (2011) go even further and recommend that social work educators screen potential candidates to social work programs before they enter the field to determine students' resilience and awareness of how emotionally demanding the

profession can be. Social work is very much behind the curve in preparing our students for the many realities of the workplace.

The CSWE uses its Educational Policy and Accreditation Standards (EPAS) to “support academic excellence by establishing thresholds for professional competence” (CSWE, 2008, p. 1). EPAS is concerned about establishing academic policy in order to ensure consistent standards across social work programs. It focuses on establishing standards for the explicit and implicit curriculum. The explicit curriculum is the formal structure of the program including the courses offered, the sequencing of those courses, and mandating field experiences. There are ten core competencies which are intended to serve as a snapshot of what the social worker preparing to graduate should know and be able to put into practice as they enter the job market. The ten core competencies are shown in Table 4.

Table 4: Core Competencies for MSW Education (CSWE, 2008)

| Core Competencies for MSW Education | |
|-------------------------------------|---|
| 1 | Identify as a professional social worker and conduct oneself accordingly |
| 2 | Apply social work ethical principles to guide professional practice |
| 3 | Apply critical thinking to inform and communicate professional judgments |
| 4 | Engage diversity and difference in practice |
| 5 | Advance human rights and social and economic justice |
| 6 | Engage in research-informed practice and practice-informed research |
| 7 | Apply knowledge of human behavior and the social environment |
| 8 | Engage in policy practice to advance social and economic well-being and to deliver effective social work services |
| 9 | Respond to contexts that shape practice |
| 10 | Engage, assess, intervene and evaluate with individuals, families, groups, organizations, and communities. |

Along with the explicit curriculum and its objectives, CSWE acknowledges the impact of the implicit curriculum, which is the learning environment in which the competencies are taught. While this encompasses many support services, it also

encompasses the intangible socialization process that shapes the professional development of the student (CSWE, 2008). Miller (2010) asserts that “the primary vehicle of socialization lies in the relationships with key figures” (p. 931), which includes professors, advisors and field instructors (Barretti, 2004).

Schools that are implementing the CSWE competencies are assumed to be producing graduates who are prepared for the workplace. In a companion document with the 2008 EPAS from CSWE, the authors state that “Demonstrated competence as defined in EPAS no more represents the end of professional preparation than did prior CSWE approaches to curriculum design. Rather, it marks a threshold across which the student passes commencing a journey of career-long learning” (Holloway et al., 2013, p. 2). This concept of a threshold is an important one according to CSWE. By demonstrating competence at the end of the social work academic career, the graduate is prepared to practice at a beginning level. EPAS views competency as the “student’s ability to execute an interrelated and comprehensive set of practice behaviors” (p.2). In the companion document and the standards themselves, there is no mention of how the standards were derived, and if this novice level of preparation is equivalent to beginning competence in the workplace.

One study in social work has looked at whether or not competence in the academic setting equals competence in practice and found that there were gaps in preparation (Agllias, 2010). In the U.K., students leave their academic career with documentation of their areas of competence and areas for growth, and employers are asked to follow up on the areas for growth as a part of supervision on the job (Jack & Donnellan, 2010). Social work education relies heavily on practicum experiences to

prepare the student for the work environment and field is now considered the signature pedagogy of social work (Council on Social Work Education, 2015). Wilson (2013) explored whether or not the addition of a practicum experience better prepared their undergraduates for practice in the U.K. The study conclusion was that:

Social work programmes [sic] should not overly depend on practice learning to prepare students to address the challenges presented by increasingly complex working environments and that educators need to work closely in collaboration with employing partners to ensure that the curriculum keeps up to date with the changing learning needs of practitioners. (Wilson, 2013, p. 1)

This recommendation for communication to occur between schools of social work and employers is important, but there is currently no mechanism in the U.S. for this to occur formally.

While the CSWE requires outcomes to be measured for students at the end of their academic career, there are no further studies which continue to measure competence in the first year of employment. An older study did ask supervisors of new MSW graduates if they felt their new employees were prepared to practice, and the majority did feel that they were, although they had several development needs (Miller & Robb, 1997). Questions for further study should explore if competency in academic terms means competency in employment settings. Also, what kind of feedback loop exists between employers and schools of social work in determining what competencies should be taught and how are they evaluated? Who should decide what adequate preparation is for practice?

Implications for employers. Employers bear a large part of the burden in ensuring the successful transition of new MSW graduates into the workforce. Employers often have policies in regards to orientation for new employees and standards in place to

ensure competent practice, but these can vary widely. As discussed earlier in this paper, providing a protracted orientation for new graduates, and quality and consistent supervision are the two biggest factors in assisting new graduates in making a smooth transition from student to professional. For employers, there may be much pressure for new graduates to hit the ground running, but this may also be problematic in terms of pushing new graduates too quickly and increasing agency turnover. This becomes even more complex in settings that do not have a social work department or even other social workers at all, as new social workers would be on their own to figure out how to balance the demands of the job. Employers who hire new graduates need to give special recognition to the fact that these social workers have developmental needs and will require additional support in order to be able to serve clients and communities effectively.

Ethical implications. Many ethical issues are involved in the transition of new MSW social work students into the workplace. The National Association of Social Workers (NASW) is the author and keeper of the code of ethics for the profession. The code speaks about the importance of competence as an ethical responsibility to clients and to the profession. Competence involves social workers being prepared for the work that they do and not practicing beyond the scope of their training (NASW, 2008).

The NASW competence standards speak to the importance of education and preparation in the practice areas in which social workers are engaged, so this does speak to the responsibility that schools of social work have for adequately preparing graduates for practice. The code has a standard for competence with clients:

- (a) Social workers should provide services and represent themselves as competent only within the boundaries of their education, training, license, certification, consultation received, supervised experience, or other relevant professional experience.

(b) Social workers should provide services in substantive areas or use intervention techniques or approaches that are new to them only after engaging in appropriate study, training, consultation, and supervision from people who are competent in those interventions or techniques. (NASW, Code of Ethics, Standard 1.04, 2008)

These standards address competent practice with clients, which is about being prepared to practice well in order to provide the best service. It is up to the employer and the social worker to determine whether the individual social worker is prepared and competent to perform certain job functions. It is up to the social worker to convey to the employer what they have learned as a result of having to meet educational competencies.

NASW also has established standards about how social workers' should conduct themselves as a responsible professional:

a) Social workers should accept responsibility or employment only on the basis of existing competence or the intention to acquire the necessary competence.

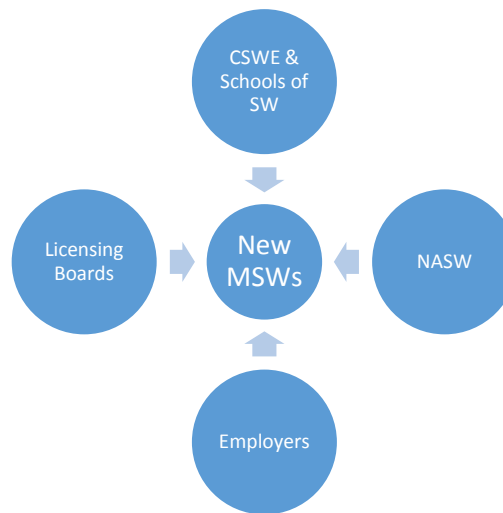
(b) Social workers should strive to become and remain proficient in professional practice and the performance of professional functions. Social workers should critically examine and keep current with emerging knowledge relevant to social work. Social workers should routinely review the professional literature and participate in continuing education relevant to social work practice and social work ethics.

(c) Social workers should base practice on recognized knowledge, including empirically based knowledge, relevant to social work and social work ethics. (NASW, Code of Ethics, Standard 4.01, 2008)

These pieces of the code place the burden of achieving competence on the social workers themselves to determine if they are able to do the work that is required in their particular job. As new professionals, they must obtain the relevant information either from school, workshops or on-the-job training. They must self-assess to determine whether or not they are using the most up-to-date information to provide best practices to

clients. And they must obtain the required supervision to be able to put into practice what they have learned. This appears to be a large burden for new graduates, who often do not know what they do not know, and so they rely on supervisors and other professionals to help them grow as a professional. If they do not have access to supervision within the profession or much on-the-job training, then the burden again falls upon them to figure out how to become competent practitioners. It would seem that employers should bear some responsibility for the supervision and training of its new graduates, but this is not mandated by licensure boards or suggested by the NASW. The NASW code of ethics only speaks to the fact that social workers must seek consultation from other social workers when it is in the best interest of clients (NASW, Code of Ethics, 2008). Interestingly, the NASW code of ethics does not require supervision of new social workers, nor does it call for orientation or reduced workloads for those new to the profession. The burden for competent practice rests solely on the shoulders of the new graduate, and supervision is not mandated in any code or law, except for those who want to pursue additional licensure. Supervision for licensure has a requirement for a certain number of hours but does not speak to the quality or content of that supervision.

Figure 5: Organizations with a Vested Interest in New MSWs



Who should have a vested interest in the well-being of our new MSW graduates?

It is a shared responsibility between schools of social work, the accrediting body for schools of social work (CSWE), state licensing boards, the NASW and employers (see Figure 5). All of these organizations have a different role to play in assisting new social work graduates. Instead, we have shifted the burden primarily to the new graduates to determine their own competence, hunt down supervision if they do not have it, and seek out professional growth and development on their own if necessary. Is this the way in which we want to treat our young professionals?

Recommendations

There are many critical points of engagement for new social workers that should be exploited for the betterment of this transition process. The critical points of engagement are student preparation about the transition while in school, an extended orientation process in the workplace with a recognition of being a new social worker, supervisors who are dedicated to helping the new social worker, or assignment of a mentor in addition to a supervisor, and even more focus on self-care and compassion

fatigue in the workplace. This echoes what Duchscher (2008) recommended for new nurses. She says that knowing what we now know about new nurse transition “should inspire educational and service institutions to provide preparatory education on transition as well as extended, sequential, and structured orientation and mentoring programs that bridge senior students’ expectations of professional work life with the reality of employment” (p. 441). Each of these areas will be discussed briefly.

Student preparation. Students should be prepared while in school for the experience of getting a job. Faculty should help students know how to size up a good job, and how to navigate getting the license. There should be some discussion of how student’s mental health histories may impact them on the job in terms of compassion fatigue, burnout and secondary traumatic stress. The emotional nature of the work can impact anyone and students should also have the importance of self-care reinforced to them, including seeking therapy as needed. Students should also know what good supervision should look like so that they can be astute about making sure that they work for an organization that knows how to treat its new graduates. Supervision should consist of more than just monitoring productivity and helping the student when they are in crisis. Good supervision should provide professional socialization and development of new skills as well. Faculty should be actively engaged in developing a curriculum which helps with the preparation process for new students by bringing in real life examples as much as possible into the classroom. Faculty members have a responsibility to make sure that new MSW graduates know how to swim the basic strokes, how to assess the climate of the pool and the potential dangers of the water before they graduate.

Employers-orientation. Orientation is such a variable process for these new graduates. Agencies that hire new graduates need to give consideration to the fact that they are new and find a way to give them more support during the orientation process. Nurses have many articles about programs to help support new graduates. More than 50 articles about new nurse transition program were found via Ebscohost. Hatler et al. (2011) advocate for a special unit in which new graduate nurses were supported with a structured orientation, a welcoming environment with supportive colleagues, and opportunities for growth and development on the unit. Chernomas, Care, Lapointe McKenzie, Guse, and Currie (2010) advocate for a one-year structured program for new nurses that included having the guidance and support of experienced nurses to help with skill building and confidence. In the U.K., Flying Start is a special one-year program for new graduate nurses that includes a mentor, protected time for working on educational objectives, and online educational materials (Banks et al., 2011). Anderson and Linden (2009) evaluated a one-year nurse residency program and found that this interactive program had a 90% retention rate for its new nursing graduates. These are but a few examples of how the nursing profession has actively worked to support and retain its new graduates through various creative programs which give recognition to being new as requiring more than just a brief orientation and then being expected to jump into the deep end.

Employers-supervision. Supervision is a critical part of support for new graduates. Supervision in some places is more about managing risk and a caseload instead of professional development (Beddoe, 2010). In Australia, there are other models of supervision where social workers have a line manager but also have a designated

supervisor for professional development. In nursing, this concept is also being implemented in the separation of the supervisor role from that of mentor. This model has not been implemented in the U.S., but is an interesting idea for making sure that new social workers get the support that they need to grow and develop in their first few years in the profession.

Increased focus on compassion fatigue, burnout, and compassion satisfaction.

Because compassion fatigue and burnout are all too common in the field of social work, increased attention should be given to risk and resiliency factors for each of these constructs. A focus on recognizing and promoting the concept of compassion satisfaction may also be helpful in promoting resilience. Of course, in order to promote resilience, quality supervisors who are aware of these issues and have the power to influence workplace variables that could decrease burnout are of critical importance.

A profile of the well-done transition for a new grad. What would a good transition for a new MSW social worker look like? It would begin with the new social worker receiving preparation in school about what the reality of employment would be like and having exposure in the classroom and practicum to as many real-life practice situations as possible. Social work students would also be prepared for how to find a good first position in an organization that recognizes the unique needs of new graduates. This organization would ideally have an extended orientation program for these new graduates that would provide regular high-quality supervision, support groups with other new professionals, continuing education, and on the job training. New graduates would be provided with both a supervisor and a mentor. New social workers should be reassured that it is normal not to know everything, and that allowing themselves to be

vulnerable and ask questions is encouraged. New social workers should have a protected caseload for at least three months or longer that gives them time to get the lay of the land so that they do not have to hit the ground running. They should have support groups with other new social workers in which they can talk about their feelings and emotions that come up to help potentially deal with compassion fatigue. Ideally, this orientation program should last for at least a year until the new graduates feel more confident and grounded. While this is a big commitment for employers, it is hoped that they would reap the benefits of such training in terms of organizational commitment, loyalty, and retention of this new employee.

While the above ideas have all been proposed and implemented in nursing programs, it is unheard of for a new social worker to have these supports. New social workers are expected to hit the ground running after a fairly brief orientation, and then often receive hit-and-miss supervision, if any at all. They may be afraid to expose themselves as newbies and be reluctant to ask questions that would promote their growth and development. And unfortunately, caseloads may be so high that new graduates do not have the luxury of receiving the training and support that they need. Complicating this, many social workers are employed in areas where they are the only social worker, and there is no one available to give them supervision or support. These are not ideal job conditions for new social workers, but in the frantic rush to get a job, any job may unfortunately be seen as preferable to no job at all.

Unanswered Questions and Areas for Future Research

There is much we do not know about the transition of new MSW graduates in the workplace as this is one of the first studies of new MSWs to date. Many questions still

need to be explored about this transition experience: Do new social workers feel prepared for the workplace? What do they wish they would have known? How can social work educators better prepare students for the world of work? Is there a significant reality shock phenomenon for new social workers, and if so, what does it look like? What would an extended orientation program for new social workers consist of, and how can agencies support this? How can employers and educators develop partnerships to ensure that new graduates are supported and make a smooth transition into the workforce? How can educators and employers better assess and prepare students for the emotional intensity of the work and help them avoid compassion fatigue and burnout? What constitutes good quality supervision and how can we ensure that new graduates will have access to this? How can supervisors and agencies assure students that it is expected that they will not know everything and encourage them to be vulnerable and ask questions? Are there innovative programs that would provide an extended orientation for new social workers and support their growth and development over at least the first year of practice?

At this point, there are many more questions than answers about new social work MSW professionals and much that needs to be done to ensure that we are adequately supporting our next generation.

Limitations

There are several limitations of this study. One is that the participants that responded to the call for participation were not as representative of diversity in terms of race and ethnicity as is the study body of the university from which the sample was recruited. Also, all of the students were from one university, but multiple campuses, so their discussion of their journey is limited to their experience in one educational system.

Study participants were asked to recall what it was like for them many months earlier, and their memories of events may not be reflective of what the actual experience was like. Participants may also have been reluctant to share negative feelings about courses taken or about their educational experience as I was known to them as an advisor or professor and this may have made them reluctant to be completely candid. As with all qualitative research, the findings cannot be generalized to any population but instead can inform our understanding of the unique needs and issues for new MSW professionals.

Conclusion

The purpose of this research study was to examine the transition experience of new MSW graduates as they journey from student to professional. The research questions for this study were as follows: (a) What is the process of transition from student to employee like for new MSW graduates? (b) What are the factors that influence this transition during the first 18 months for new MSW graduates? and (c) Are there critical junctures in the processes of transitioning from being a student through the first 18 months of MSW employment that are related to satisfaction and/or professional growth?

In response to the first research question about the process of transition, this study has shown that the transition from student to employee is extremely variable for new MSWs in terms of finding a good job fit, receiving an adequate orientation, getting supervision of adequate quantity and quality, and getting the support that they need for continued growth and development in terms of emotions, knowledge, and practice wisdom. By and large, students were not prepared for the transition, received little orientation, somewhat spotty supervision, and were surprised by the experience of not knowing and the difficulties of the workplace, including the onset of compassion fatigue

and burnout. A fairly significant number of graduates changed jobs during the first 18 months, and this should also be examined in more depth in future studies.

As to the second research question, there are several factors that influence this transition. The transition is affected by the personal experience and willingness to learn of the individual student, the school of social work's preparation of the student for the profession and the workplace, and the commitment of the organization to support and develop the new employee. Lack of preparation during school about the world of work can make the transition difficult. Lack of, or minimal orientation, set the new graduates up to flounder and is not an ethical way to treat these new employees. Caseloads should be protected for several months while new professionals adjust to the demands of the workplace. New social workers were blind-sided by the extent of compassion fatigue that they felt, as well as burnout attributable to organizational characteristics.

In answer to the third research question about critical junctures, there are many crucial points of intervention that should be exploited: preparation from school, an extended orientation with caseload protection, quality supervision focused on development of the new social workers, organizational support to prevent burnout and compassion fatigue as well as continued opportunities for personal and professional growth.

To stay with the metaphor of this study, new social workers need good swim instructors to help them learn to swim and begin to understand the much larger process of becoming an accomplished swimmer. New graduates test the waters through practicum and then again when they are looking for a job, and try to assess whether or not the waters at a particular place are calm or prone to storms and crisis. After accepting a job,

they plunge into the world of work and then have to sink or swim. Many issues have the potential to make them feel like they are drowning, and they need several good lifeguards to help them stay afloat, including co-workers and mentors. Keeping your head above water is hard work and takes effort to maintain balance so that they do not get tired and begin to go under. Maintaining this balance between compassion fatigue and self-care is precarious and again the lifeguard should provide some guidance. Being able to maintain balance brings confidence and new graduates begin to feel that they can do more than simply tread water; they can learn to ride the waves and not be tossed about by difficulties. Through the journey, they have learned some survival strategies so that they can provide good care to others and to themselves.

Our new MSW social work graduates deserve a good start in the profession and this requires collaboration between the student, social work educators, employers and policy organizations to ensure that they make a smooth transition from school to work and develop into confident and competent professionals. One huge question remains: Why is there so little attention to this issue? It is hoped that this research study will spawn considerable dialogue, research and collaboration to support new social workers at all levels as they begin their careers.

Appendix A: Demographic Characteristics of MSW Students Nationally, 2012

| Demographic Category | <u>Full-Time</u> | | <u>Part-Time</u> | |
|-------------------------------------|------------------|----------|------------------|----------|
| | <u>Number</u> | <u>%</u> | <u>Number</u> | <u>%</u> |
| Gender | | | | |
| Male | 4,809 | 14.3 | 2,700 | 14.6 |
| Female | 28,845 | 85.7 | 15,852 | 85.4 |
| Unknown | 830 | | 799 | |
| Age Group | | | | |
| Under 25years | 11,801 | 34.2 | 2,630 | 13.6 |
| 25–34 | 13,366 | 38.8 | 7,685 | 39.7 |
| 35–44 | 4,199 | 12.2 | 4,447 | 23 |
| 45 years or older | 2,807 | 8.1 | 3,097 | 16 |
| Unknown | 2,311 | 6.7 | 1,492 | 7.7 |
| Racial/Ethnic Identification | | | | |
| White (non-Hispanic) | 19,504 | 56.6 | 10,433 | 53.9 |
| African American/Other Black | 5,671 | 16.4 | 3,802 | 19.6 |
| Chicano/Mexican American | 948 | 2.7 | 550 | 2.8 |
| Puerto Rican | 336 | 1 | 103 | 0.5 |
| Other Latino/Hispanic | 2,231 | 6.5 | 1,443 | 7.5 |
| American Indian/Native American | 272 | 0.8 | 155 | 0.8 |
| Asian American/Other Asian | 1,470 | 4.3 | 559 | 2.9 |
| Pacific Islander | 86 | 0.2 | 72 | 0.4 |
| Other | 326 | 1 | 115 | 0.6 |
| Multiple Race/Ethnicity | 751 | 2.2 | 433 | 2.2 |
| Unknown | 2,889 | 8.4 | 1,686 | 8.7 |
| Number of programs reporting | 210 | | 195 | |

(Hunsaker et al., 2015, p. 31)

Appendix B: Participant Information form

| | Questions | |
|----|--|--|
| 1 | Gender | _____ Male _____ Female |
| 2 | How would you define your ethnicity? | |
| 3 | When did you graduate with your MSW? | Month/Year: |
| 4 | How long have you been employed as an MSW? | Months/Year: |
| 5 | How many jobs have you held since you graduated with your MSW? | |
| 6 | Work status | _____ Full time _____ Part time |
| 7 | Do you hold a bachelor's in social work? If so, what year did you receive it? | Year received bachelor's degree in social work: |
| 8 | If you do not have a BSW, what was your undergraduate degree in? | Degree: Graduation date: |
| 9 | What is your current age? | |
| 10 | How many years of work experience in a social service area have you had prior to obtaining your MSW? | |
| 11 | How many years of non-social work employment experience do you have prior to getting your MSW? | |
| 12 | What kinds of social services jobs did you hold before getting your MSW? | |
| 13 | Did you work in a social service job during your MSW program and if so, what? | Yes, what? No |
| 14 | Did you get hired where you did one of your practicum experiences? | Yes No |
| 15 | If you have a caseload, how would you describe it? | About right/ too many cases/ too few cases? |
| 16 | Is your supervisor an MSW? | Yes No If no, what degree/background? |
| 17 | What area of social work do you currently work in? | Health, mental health, child welfare, addictions, schools, macro, veterans, other? |
| 18 | Contact information: | Name: |
| 19 | Phone numbers where you can be reached | Cell: Alt Number: |
| 20 | Email addresses (home is preferred or work and home) | |

Appendix C: Informed Consent

INDIANA UNIVERSITY INFORMED CONSENT STATEMENT FOR

New Master of Social Work Graduates in the Work Force

You are invited to participate in a research study of how master's level social workers experience the transition from student to work. You were selected as a possible subject because you graduated within the last sixteen months from your MSW program. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

The study is being conducted by [Susan Larimer in fulfillment of her doctoral dissertation from the IU School of Social Work. The principal investigator is Dr. Kathy Lay, the dissertation chair.

STUDY PURPOSE

The purpose of this study is to understand the journey that new MSW graduates experience as they transition from student to working professional in their first year after graduation and explore what contributes to professional satisfaction and development.

NUMBER OF PEOPLE TAKING PART IN THE STUDY:

If you agree to participate, you will be one of approximately 30 subjects who will be participating in this research.

PROCEDURES FOR THE STUDY:

If you agree to be in the study, you will do the following things:

- Consent to be interviewed by the researcher, Susan Larimer
- Consent to having your interview audiotaped and transcribed with identifying information and identifying events deleted from the transcript to protect your privacy.
- Interviews will be conducted at a mutually convenient location or by phone. Interviews will usually last from 30 to 90 minutes, with the potential for a repeat interview should the researcher like to re-contact you for further clarification. This study is expected to last for 18 months.

RISKS OF TAKING PART IN THE STUDY:

While on the study, the risks are deemed to be minimal. Those risks may include: You may experience some discomfort in talking about subjects that are difficult or emotional. You can also let the researcher know that you feel uncomfortable and do not care to answer a particular question. You are always welcome to stop the interview at any point and refuse to participate or have certain sections deleted. While confidentiality is stringently protected, absolute confidentiality cannot be guaranteed due to unforeseen circumstances (data breach). If you feel upset as a result of participating in this interview, the researcher will refer you to social or psychological support in conjunction with your circumstances.

BENEFITS OF TAKING PART IN THE STUDY:

The benefits to participation that are reasonable to expect are that you will be contributing to research in an area where this is little known about this situation. You will be assisting the researcher in helping universities and employers understand the transition process better and react accordingly.

ALTERNATIVES TO TAKING PART IN THE STUDY:

Instead of being in the study, you have these options: You may choose not to participate at any time and that will not jeopardize your relationship with the researcher or the school in any way.

CONFIDENTIALITY

Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published. The researcher, the dissertation committee members and the research team assisting the researcher will have access to the de-identified transcript of your interview. The researcher may use a transcription service for help with transcribing and those individuals will have to complete training from The Institutional Review Board on maintaining confidentiality. All recordings will be destroyed at the end of the dissertation process, although transcripts will be maintained indefinitely for future research purposes. All transcripts and recording will be kept either in locked cabinets or on password protected computers.

Organizations that may inspect and/or copy your research records for quality assurance and data analysis include groups such as the study investigator and his/her research associates, the Indiana University Institutional Review Board or its designees, and the dissertation committee members, and (as allowed by law) state or federal agencies, specifically the Office for Human Research Protections (OHRP) and the Food and Drug Administration (FDA) [for FDA-regulated research and research involving positron-emission scanning], the National Cancer Institute (NCI) [for research funded or supported by NCI], the National Institutes of Health (NIH) [for research funded or supported by NIH], etc., who may need to access your medical and/or research records.

COSTS

There is no cost to participate in this study, although you will be responsible for your own travel money if you choose to meet the researcher at a mutually agreed upon location for the interview.

PAYMENT

You will be offered a \$10 gift card to a local restaurant (McDonald's, Starbuck's, Panera's) for your time and effort in assisting with this study. No other compensation will be offered.

COMPENSATION FOR INJURY

No injury is expected so no compensation is offered.

FINANCIAL INTEREST DISCLOSURE

The researcher nor her committee members do not have any financial interest in this study.

CONTACTS FOR QUESTIONS OR PROBLEMS

For questions about the study or a research-related injury, contact the researcher Susan Larimer at slarimer@iupui.edu or at 317-274-0050 or the principal investigator, Dr. Kathy Lay at kalay@iupui.edu or at 317-274-6705. If you cannot reach the researcher during regular business hours (i.e. 8:00AM-5:00PM), please call the IU Human Subjects Office at (317) 278-3458 or (800) 696-2949.

In the event of an emergency, you may contact Susan Larimer at 317-409-1760 (cell phone). [For questions about your rights as a research participant or to discuss problems, complaints or concerns about a research study, or to obtain information, or offer input, contact the IU Human Subjects Office at (317) 278-3458 or [for Indianapolis] or (812) 856-4242 [for Bloomington] or (800) 696-2949.

VOLUNTARY NATURE OF STUDY

Taking part in this study is voluntary. You may choose not to take part or may leave the study at any time. Leaving the study will not result in any penalty or loss of benefits to which you are

entitled. Your decision whether or not to participate in this study will not affect your current or future relations with Indiana University or Indiana University School of Social Work.

SUBJECT'S CONSENT

(This section should be in first person) In consideration of all of the above, I give my consent to participate in this research study.

I will be given a copy of this informed consent document to keep for my records. I agree to take part in this study.

Subject's Printed Name: _____

Subject's Signature: _____ **Date:** _____

(must be dated by the subject)

Printed Name of Person Obtaining Consent: _____

Signature of Person Obtaining Consent: _____ **Date:** _____

Appendix D: Email letter for recruitment

Greetings! This email is an invitation to participate in a research study as a part of a doctoral dissertation on the transition from student to working professional for Master of Social Work graduates. You are being contacted because you have graduated from an MSW program within the past 16 months. The purpose of this study is to explore the journey from student to professional for MSWs and understand what the process has been like for you in terms of what has been helpful, challenging, expected and unexpected. There is very little research in the field of social work about our new graduates, so by agreeing to participate, you will help increase the knowledge about what the new graduate social work experience is like.

In order to participate in this study, you must have been employed as an MSW (part or full-time) between nine and 18 months. If you agree to participate and meet the criteria for this study, I will contact you about scheduling an interview preferably in person, but phone or Skype interviews could work as well. Interviews will last approximately one hour, although could go longer depending on your availability and interest. While I know many of you have known me in the capacity of professor, for purposes of this research, I am a student. Your comments during this process will be taped and transcribed and any identifying information (your name, where you work, comments about specific people or identifying incidents) will be deleted or disguised in order to protect your confidentiality.

Those who are eligible to participate and agree to an interview will be offered a \$10 gift card as a token of thanks for your time in helping with this project. More information about the study and an informed consent statement will be presented to you when you meet with me for the interview.

Please respond by email if you would like to participate. Feel free to forward this email on to others that you may feel would like to participate as well. Participants do not have to have graduated from Indiana University, but could have obtained their MSW from any other university.

Thank you for considering being involved in this research. Your contributions will not only help me with completion of my doctorate, but will result in increasing what our profession knows about the process of becoming a professional social worker.

Contact Information:

Susan Larimer, LCSW, doctoral candidate

Appendix E: Transcriptionist Confidentiality Agreement

Confidentiality Agreement

Transcriptionist

I, Cathy Butler transcriptionist, agree to maintain full confidentiality in regards to any and all audiotapes and documentations received from Susan Larimer related to her research study on the researcher study titled New MSW Graduates in the Workforce: The Journey from Student to Professional. Furthermore, I agree:

1. To hold in strictest confidence the identification of any individual that may be inadvertently revealed during the transcription of audio-taped interviews, or in any associated documents.
2. To not make copies of any audiotapes or computerized titles of the transcribed interviews texts, unless specifically requested to do so by the researcher.
3. To store all study-related audiotapes and materials in a safe, secure location as long as they are in my possession.
4. To return all audiotapes and study-related materials to Susan Larimer in a complete and timely manner.
5. To delete all electronic files containing study-related documents from my computer hard drive and any back-up devices.

I am aware that I can be held legally responsible for any breach of this confidentiality agreement, and for any harm incurred by individuals if I disclose identifiable information contained in the audiotapes and/or files to which I will have access.

Transcriber's name (printed)

Cathy Butler

Transcriber's signature

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Curriculum Vitae

Susan Larimer

EDUCATION:

GRADUATE

| Institution | Degree | Date Awarded |
|--------------------|-----------------------|--------------|
| Indiana University | PhD | 2015 |
| Indiana University | Master of Social Work | 1987 |

UNDERGRADUATE

| Institution | Degree | Date Awarded |
|-------------------|--------|--------------|
| Taylor University | BA | 1985 |

FURTHER EDUCATION: (Advanced and Specialty Training, Fellowships, Institutes)

| Institution | Credential | Date Awarded |
|---|-------------------------------------|--------------|
| Cincinnati Institute for Family Therapy | Specialized Family Therapy Training | 1988 |
| Grief and Bereavement Institute | Certified Bereavement Counselor | 2002 |

APPOINTMENTS:

ACADEMIC (i.e. academic appointments, including academic administrative roles)

| Institution | Rank/Title | Inclusive Dates |
|--------------------|------------------------------|-----------------|
| Indiana University | Lecturer | 2012 to present |
| Indiana University | Student Services Coordinator | 2004-2012 |
| Indiana University | Field Instructor | 1989-2004 |
| Indiana University | Adjunct faculty | 1998-2004 |

NON-ACADEMIC (i.e. administrative, hospital or corporate appointments, consultantships)

| Institution/Entity | Title | Inclusive Dates |
|---|-------------------------|-----------------|
| Community Home Health and Hospice | Bereavement Coordinator | 1998-2004 |
| Community Hospital | Mental Health Therapist | 2002-2004 |
| Home Health Consultant | Social Worker | 1998-1999 |
| Visiting Nurse Service Home Health | Clinical Manager | 1993-1997 |
| Visiting Nurse Service Independent Living Program | Manager | 1990-1993 |
| American Stress and Family Counseling Center | Therapist | 1987-1990 |

LICENSURE, CERTIFICATION, SPECIALTY BOARD STATUS (as applicable for discipline):

| | |
|---------------------------------|------------------|
| Credential | Inclusive Dates |
| Licensed Clinical Social Worker | 12/92 to present |

PROFESSIONAL ORGANIZATION MEMBERSHIPS:

| | |
|---|-----------------|
| Organization | Inclusive Dates |
| Indiana Society for Social Work Leadership in Health Care | 2007 to present |
| National Association of Social Workers–Board Member | 2011 to 2014 |
| Society for Social Work Leadership in Health Care | 2009-2012 |
| Indiana Association for Home and Hospice Care | 2001-2003 |
| Indiana Association of Social Work Educators | 2005-2011 |

PROFESSIONAL HONORS AND AWARDS:

TEACHING

| | | |
|-------------------------------|---------------------------------|----------------|
| Award Name | Granted By | Date Awarded |
| Outstanding Top Teacher Award | MSW Student | 2015 |
| Outstanding Professor Award | Assoc Intercollegiate Athletics | 2014 (January) |
| PhD Program Teaching Award | Indiana University | 2011 |

PROFESSIONAL DEVELOPMENT: List courses, workshops or training programs attended to enhance your performance in any area of academic work.

| | | |
|---|--------------------------------------|-------------|
| Course/Workshop Title | Provider | Date |
| International Congress of Qualitative Inquiry | Same | 2014 & 2015 |
| Edward C. Moore Conference | Indiana University | 4/2014 |
| Narrative Therapy | Evanston Narrative Therapy Institute | 3/2014 |
| IU Alumni Conference | Indiana University | 3/2014 |
| FALCON conference on teaching for lecturer's and adjunct faculty | Indiana University | 11/2013 |
| International Congress of Qualitative Inquiry | Congress of Qualitative Inquiry | 5/2013 |
| Indiana Society for Social Work Leadership in Health Care Annual Conference | ISSWLHC | 2005-2015 |

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|---|---|------------------|
| Helping Professionals Help Families Have Difficult Conversations | University of Indianapolis | 5/2012 |
| Health Care Social Work Conference | Indiana Society for Social Work Leadership in Health Care | 2006-2012 |
| National Health Care Conference | Society of Social Work Leadership in Health Care | 2008, 2010, 2011 |
| Annual Program meeting | Council on Social Work Education | 2005-2009, 2012 |
| Baccalaureate Program Directors Annual Meeting | Council on Social Work Education | 2010 |
| State Social Work Conference | National Association of Social Workers Indiana Chapter | 2006-2011 |
| Cognitive-Behavioral Therapy Training | Continuing Education Institute | 2007 |
| School Social Work Issues | Indiana School Social Work Association | 2007-2009 |
| Aging Issues | Alzheimer's Association State Conference | 2005 |
| Understanding Family Caregivers | University of Indianapolis Institute on Aging and Community | 2011 |
| Survivors of Violent Death | American Association of Death Education Counselors | 2005 |
| Conference on Aging and Living Well | Indiana University Alumni Association | 2005 |
| Professional Updates for Social Workers | Indiana University Alumni Association | 2005-2011 |
| Governor's Conference on Aging | Indiana Department of Aging and In-home Services | 2003 |
| Sarcoidosis Annual Conference, Annual Conference | Indiana Sarcoidosis Association | 2003-2010 |
| | Association of Death Education Counselors | 2003 |
| Understanding the Difficult Child | | 2002 |
| Living with Grief national teleconferences | Hospice Foundation of America | 2001-2004 |
| Bereavement Certification Program, Beginning Certification | Grief and Bereavement Institute | 2000 |
| Understanding and Responding to Complicated Mourning | Center For Loss and Life Transition | 1999 |
| Bereavement: Children at Risk, | Center For Loss and Life Transition | 1999 |
| The Many Faces of Grief: How to Help Others through Loss, presented by D Felton | Grief and Bereavement Institute | 1999 |
| Loss & Grief: A Healing | American Network of Home | 1998 |

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| Perspective, presented by E. Williams | Health Social Workers | |
| Maximum Impact: The Artful Application of Brief, Solution-focused Therapy in Health Care, The Spiritual Dimension of Grief by Alan Wolfelt | American Network of Home Health Social Workers | 1998 |
| | Flanner and Buchanan | 1998 |

TEACHING:

UNDERGRADUATE

| Course # | Short Title | Format | Role | Term |
|----------|---------------------------|---------|---------|--------|
| S442 | Older Adults | Lecture | Adjunct | S 2003 |
| S442 | Older Adults | Lecture | Adjunct | S 2002 |
| S442 | Older Adults | Lecture | Adjunct | S 2000 |
| S300 | Physical Change and Aging | Lecture | Adjunct | S 2001 |
| S300 | Social Aspects of Aging | Lecture | Adjunct | F 2002 |

GRADUATE

| Course # | Short Title | Format | Role | Term |
|----------|--|----------------------|----------|--------|
| S514 | Professional Practice Skills | Practice | Lecturer | S2015 |
| S692 | Practice with Older Adults | Lecture | Lecturer | F 2015 |
| S504 | Professional Practice Skills (2 sections) | Lecture/ Practice | Lecturer | F 2014 |
| S501 | Social Work: An Immersion | Lecture | Lecturer | F 2014 |
| S694 | Social Work Practice with Older Adults | Lecture | Lecturer | S 2014 |
| D517 | Assessment in Mental Health | Online | Lecturer | S 2014 |
| S514 | Practice with Individuals, Families and Groups | Lecture | Lecturer | S 2014 |
| S555 | Field Seminar | Lecture/ Visits | Liaison | S2014 |
| S694 | Social Work Practice with Older Adults | Lecture | Lecturer | S 2013 |
| S514 | Practice with Individuals, Families and Groups | Lecture | Lecturer | S 2013 |
| D501 | Social Work: An Immersion | Online | Lecturer | S 2013 |
| S692 | Social Work in Health Care: Practice Basics | Lecture | Lecturer | F 2012 |
| S504 | Professional Practice Skills I | Lecture | Lecturer | F 2012 |
| S501 | Social Work: An Immersion | Lecture | Lecturer | F 2012 |
| S555 | Field Practicum Seminar I | Lecture | Lecturer | S 2012 |
| S555 | Field Practicum Seminar I | Lecture | Liaison | 2012 |
| S514 | Practice with Individuals, Families and Groups | Lecture | Lecturer | S 2012 |

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|------|---|--------------|----------|---------|
| S694 | Social Work Practice with Older Adults | Lecture | Lecturer | S 2012 |
| S694 | Social Work Practice with Older Adults | Lecture | Lecturer | S 2011 |
| S501 | Social Work: An Immersion | Lecture | Lecturer | F 2011 |
| S600 | China and U.S. Health Care: A Cross-Cultural Comparison | Study Abroad | Lecturer | Su 2011 |
| S694 | Social Work Practice with Older Adults | Lecture | Lecturer | S 2010 |
| S501 | Social Work: An Immersion | Lecture | Lecturer | Su 2011 |
| S600 | China and U.S. Health Care: A Cross-Cultural Comparison | Study Abroad | Lecturer | Su 2010 |
| S517 | Assessment in Mental Health and Addictions | Lecture | Lecturer | Su 2010 |
| S694 | Social Work Practice with Older Adults | Lecture | Lecturer | S 2009 |
| S517 | Assessment in Mental Health and Addictions | Online | Lecturer | F 2009 |
| S501 | Social Work: An Immersion | Lecture | Lecturer | Su 2009 |
| S692 | Health Care Practice I | Lecture | Lecturer | F 2009 |
| S682 | Assessment in Mental Health and Addictions | Online | Lecturer | S 2009 |
| S682 | Assessment in Mental Health and Addictions | Online | Lecturer | S 2008 |
| S682 | Assessment in Mental Health and Addictions | Online | Lecturer | Su 2008 |
| S692 | Health Care Practice I | Lecture | Lecturer | F 2008 |
| S692 | Health Care Practice I | Lecture | Lecturer | F 2007 |
| S682 | Assessment in Mental Health and Addictions | Online | Lecturer | S 2007 |
| S682 | Assessment in Mental Health and Addictions | Lecture | Lecturer | Su 2007 |
| S682 | Assessment in Mental Health and Addictions | Lecture | Lecturer | F 2007 |
| S692 | Health Care Practice I | Lecture | Lecturer | F 2006 |
| S501 | Social Work: An Immersion | Lecture | Lecturer | Su 2006 |
| S692 | Health Care Practice I | Lecture | Lecturer | F 2005 |
| S515 | Social Policy and Services II: Mental Health | Lecture | Lecturer | Su 2005 |
| S631 | Social Policy and Services II: Mental Health | Lecture | Adjunct | Su 2004 |

S600 Social Work with Groups Lecture Adjunct F 1998

TEACHING ADMINISTRATION AND CURRICULUM DEVELOPMENT: List activities focused on enhancing the teaching and learning environment. Developed online course for Assessment in Mental Health and Addictions; received additional funding from school, 2006

SERVICE:

Distinguish between service to the University and service to your professional discipline. If a service activity spans academic levels (i.e. Department, School, Campus, University) list it once. Identify your role in leadership (i.e. member, co-chair, chair).

UNIVERSITY SERVICE:

DEPARTMENT

| Activity | Role | Inclusive Dates |
|---|---------|-----------------|
| Search Committees | Member | 2014-2015 |
| MSW Committee | Member | 2004-present |
| Assist with Student Outreach Health Care Clinic (SOC) | Faculty | 2012-present |

CAMPUS

| Activity | Role | Inclusive Dates |
|------------------------------|----------------------------|-----------------|
| Graduate Recruitment Council | Social Work representative | 2008-2011 |

PROFESSIONAL SERVICE:

LOCAL/STATE

| Organization | Activity | Inclusive Dates |
|---|------------------------------------|-----------------|
| Indiana Society for Social Work Leadership in Health Care | Treasurer | 2012 to present |
| Indiana Society for Social Work Leadership in Health Care | Past President | 2011-2012 |
| Indiana Society for Social Work Leadership in Health Care | President | 2010-2011 |
| Indiana Society for Social Work Leadership in Health Care | Conference Co-chair | 2009-2010 |
| National Association of Social Workers Indiana Chapter | Board Member, Nominating committee | 2011 |
| Indiana Association of Social Work Educators | Conference Co-chair | 2008-2009 |
| Alzheimer's Association State | State Planning Committee | 2005 |

| | | |
|---|--|-----------|
| Conference | | |
| Catholic Social Services | Presentation to Alzheimer's Caregivers | 2006-2008 |
| Brooke's Place for Grieving Young People | Volunteer group facilitator | 2007-2009 |
| Camp Erin Grief Camp | Crisis counselor | 2011 |
| Camp Healing Tree Youth Grief Camp | Crisis counselor, intake coordinator | 2005-2009 |
| NATIONAL | | |
| Society for Social Work Leadership in Health Care | Conference Committee | 2011 |

PATIENT CARE/CLINICAL SERVICE: List activities in service to patients, indicating position, clinical venue and inclusive dates. Include role in administrative, organizational and team activities that improve the environment for clinical care. If the activities extend beyond the local level, indicate the sphere or extent of impact (i.e. regional, national, and international).

Student Outreach Clinic, Social Work faculty consultant, 2011, 2012

Camp Healing Tree Intake Coordinator for grieving young people, 2008-2009

INVITED PRESENTATIONS -REFEREED

| Title | Organization | Date |
|--|---|--------|
| LOCAL | | |
| Capturing What Works (Poster) | Edward C. Moore Conference, Indpls | 4/4/14 |
| Safety Issues in the Home | Home Care Excel | 2007 |
| REGIONAL | | |
| Assessment Tools for Social Workers | Indiana Society for Social Work Leaders in Health Care | 2009 |
| Motivational Interviewing in Health Care | Indiana Society for Social Work Leaders in Health Care | 2010 |
| Coping with Complicated Grief | Indiana University Alumni Conference | 2005 |
| Alzheimer's Caregivers Coping with Grief | Alzheimer's State Conference, Indiana | 2005 |
| Chronic Illness and Marriage | Governor's Conference on Aging | 2003 |
| Children and Grief at School | Indiana Association of Health, Physical Education and Dance Professionals | 2003 |

NATIONAL

| | | |
|---|-----------------------------|------|
| Bai,J., & Larimer, S. Best Practices in Short Term Study Abroad. (Poster) | CSWE Annual Program Meeting | 2013 |
| Lay, K., & Larimer, S. Women in | CSWE Annual Program Meeting | 2012 |

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|---|--|------|
| Recovery: The Exploration of Identity (Poster) | | |
| Vernon, R., & Larimer, S. Where were you in 1602? | CSWE Annual Program Meeting | 2008 |
| Schaefer, N., Larimer, S., Whitehead, K. Camp healing tree: A family grief program. | American Association of Death Education Counselors | 2003 |
| Larimer, S., Weber, P., & Kluemper, T. Social work: The critical role in agency risk management. | American Network of Home Health Social Workers National conference | 1998 |
| Larimer, S. Depression, Delirium & Dementia: Understanding and assessing three common clinical presentations. | American Network of Home Health Social Workers National conference | 1997 |

INTERNATIONAL

| | | |
|------------------------------------|---|------|
| New MSW Graduates in the Workforce | International Congress of Qualitative Inquiry | 2015 |
| Women and Recovery | International Congress of Qualitative Inquiry | 2014 |

INVITED PRESENTATIONS–NON REFERREED

| Title | Organization | Date |
|---|--|--------|
| LOCAL | | |
| Larimer, S., & Lay, K. Motivational Interviewing | Franciscan St. Elizabeth Hospital | 4/2014 |
| Larimer, S., & Lay, K. Motivational Interviewing | Indiana Society for Social Work Leaders in Health Care | 2013 |
| Larimer, S. Coping with grief during the holidays | Hancock Memorial Hospital | 2006 |
| Larimer, S. Chronic illness and self-esteem. | Indianapolis Sarcoidosis Conference | 2005 |
| Larimer, S. Coping with chronic illness. | Indianapolis Sarcoidosis Conference | 2004 |
| Larimer, S. Couples coping with chronic illness | Indianapolis Sarcoidosis Conference | 2003 |
| Larimer, S. Coping with grief and loss | Nursing homes & Flanner & Buchanan | 2000 |

REGIONAL

| | | |
|---|---|---------|
| Larimer, S. The History of Case Management: Mary Richmond | Central Indiana Case Management Association | 12/2012 |
| Larimer, S. Effective Communication | Breaking New Ground, Purdue University Extension Conference | 2000 |

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|---|--|------|
| Vernon, B., & Larimer, S. Where were you in 1602? | Indiana Association of Social Work Educators | 2009 |
| Vernon, B., & Larimer, S. What's new in social welfare? Visit Elizabethan England and find out. | Indiana Alumni Association Winter College | 2007 |

Publications

Refereed

Riner, M. E., Bai, J., & Larimer, S. (2015). Intercultural global health assessment and reflection framework for teaching study abroad classes. *Journal of Nursing Education and Practice*, 5(5), 65-72

Glassburn, S., Weber, P., & Kluemper, T. (1998). Social work & risk management, *Caring Magazine*.